

A RECOVERY READER

A GUIDE FOR SPONSORS, STUDENTS & TEACHERS



SELECTED WRITINGS FROM
60 YEARS
OF 12-STEP RELATED
ARTICLES, ESSAYS, &
PERSONAL EXPERIENCE

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A Recovery Reader

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the Process of the Program**

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*Portions of this book have been reprinted in Sponsor Magazine.
sponsormagazine.org*

WARNING: Travel beyond this point without a Sponsor is not advised.

Intent of This Book

This book is intended to be used:

- a) to serve as a personal enrichment course-in-a-book on Recovery and AA History.
- b) for a Sponsor who shares this information with someone they are attempting to help.
- c) to create a new class as appropriate to your area's needs and opportunity by taking the suggestions and materials to assemble or revise as you see fit.

It is not presented as the “only” way to do the work of sharing the Program, but is synthesis of work by over thirty authors over the past half century plus of effective AA recovery.

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A Newcomers Class

The original form of the fellowship, through the Oxford Group, was intensely personal. Later, when the Saturday Evening Post article appeared in 1941, there were too many Newcomers for the existing fellowship to sponsor. Several of the local service committees organized “Newcomer Classes” under various names, to introduce people to the program, the steps to move them into *working* their steps.

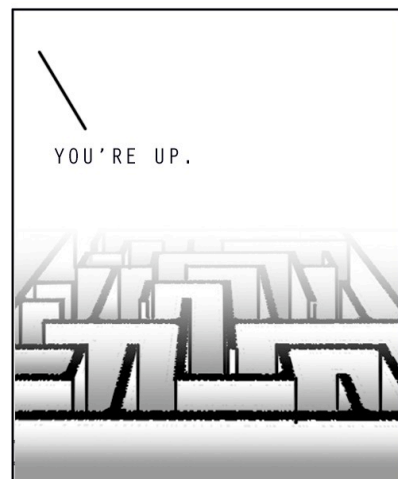
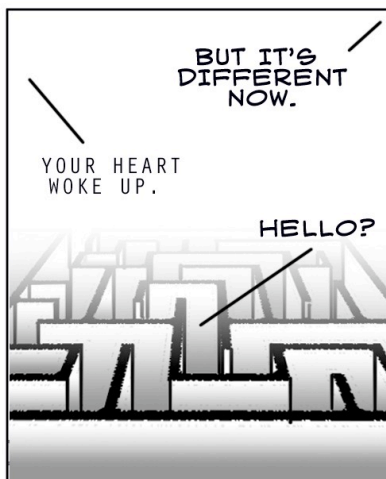
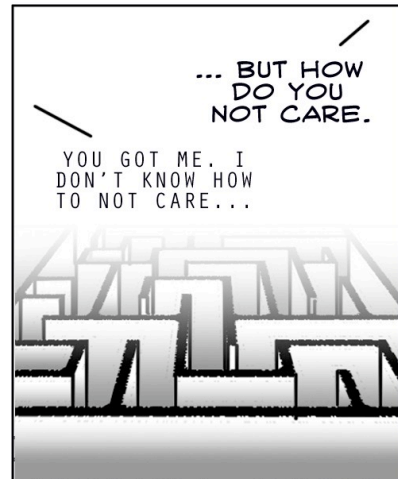
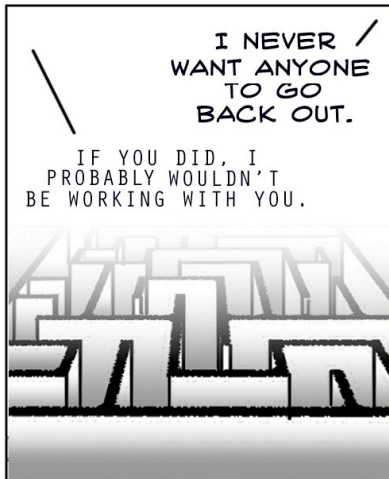
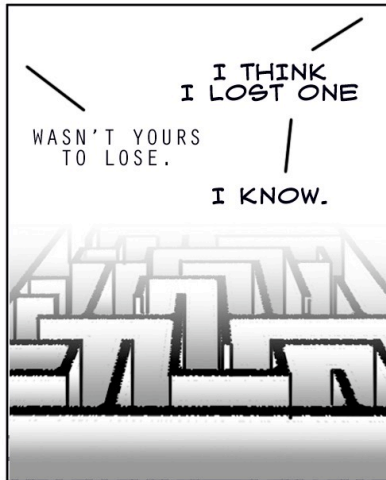
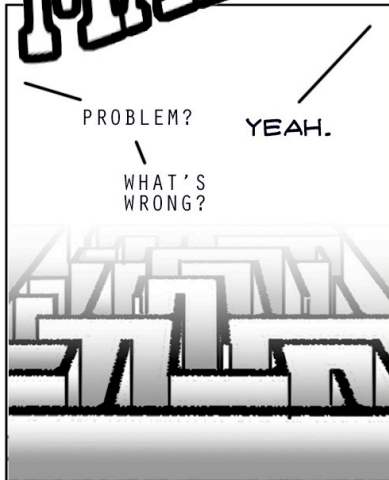
Modern treatment centers have been based on the educational model, but most of those centers do the work of separating the client from alcohol (and drugs) with various approaches to educating the alcoholic/addict to the nature of the disease and the psychology of addiction. They then discharge their clients with varying levels of follow-up, and advise them to attend local AA meeting when they are discharged.

This information can help anyone with a need to learn more about the history and process of 12-Step recovery, or help someone else learn about them.

MAZING RECOVERY

THE SPONSOR'S SPONSOR

BY JOE A.



An Educational Approach

A Classroom Model to Carry the Message

The single session outlined in this document can be duplicated as presented or can be adopted to different approaches to Recovery as a one-time workshop, weekly class (for a set number of sessions), or as part of an ongoing educational process.

This class is not affiliated with, not approved by, and not required by Alcoholics Anonymous, the Twelve Step Program, Alcoholics Anonymous World Service Organization, or any other service board or body of that fellowship. It is a method for individual members of the Fellowship to carry the message to newcomers or to returnees who are beginners again.

This class is not affiliated with, not approved by, and not required by the Healing Place of Wake County or Recovery Dynamics, but works in cooperation with those organizations.

This is a personalized approach to introducing newcomers to AA, the Steps, the Tools, the Big Book, and the Principles of the Twelve Step program, which are now represented by over 180 Twelve Step programs registered with AA WSO.

The focus is on Recovery and how the newcomer can reproduce the results now enjoyed by several million individuals in over 80 countries around the world.

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Components and Resources

The class outlined in this guide can be structured a number of ways:

It can be:

- a) a one time, workshop structure conducted by a panel with time and experience in the 12-Step Program;
- b) an on-going class where people agree to show up for a certain number of meetings (one session workshop, four week classes, a semester, etc.);
- c) an introductory class for newcomers who may be in a detox, treatment facility, or otherwise assembled as a group.

The structure is seen as educational and not a replacement for doing the work of a 12-Step Program.

When viewed as a teaching vehicle, the focus shifts from traditional sponsor model to one of engagement.

Engagement

The key to successful teaching is engagement – to get the participants of the class, or at least some of them, interacting, sharing questions about the Program, the History, the Steps, the Tools, or details of any of this set of topics.

The session leader or leaders then take this dialog to focus on the topics being raised and is treated as a teaching opportunity.

With teaching, you can only provide the words and ways to make information available. Once a participant become actively involved, the message becomes tailored, and more relevant to that participant's individual Recovery, but also demonstrates to the other people in the class that becoming active effects the way the Program is worked..

For the purpose of the class, this structure has evolved to provide an opening sequence to make particular questions non-threatening for the participants, so that, when the initial presentation is made, we can ask certain

questions without sounding like authorities or superiors.

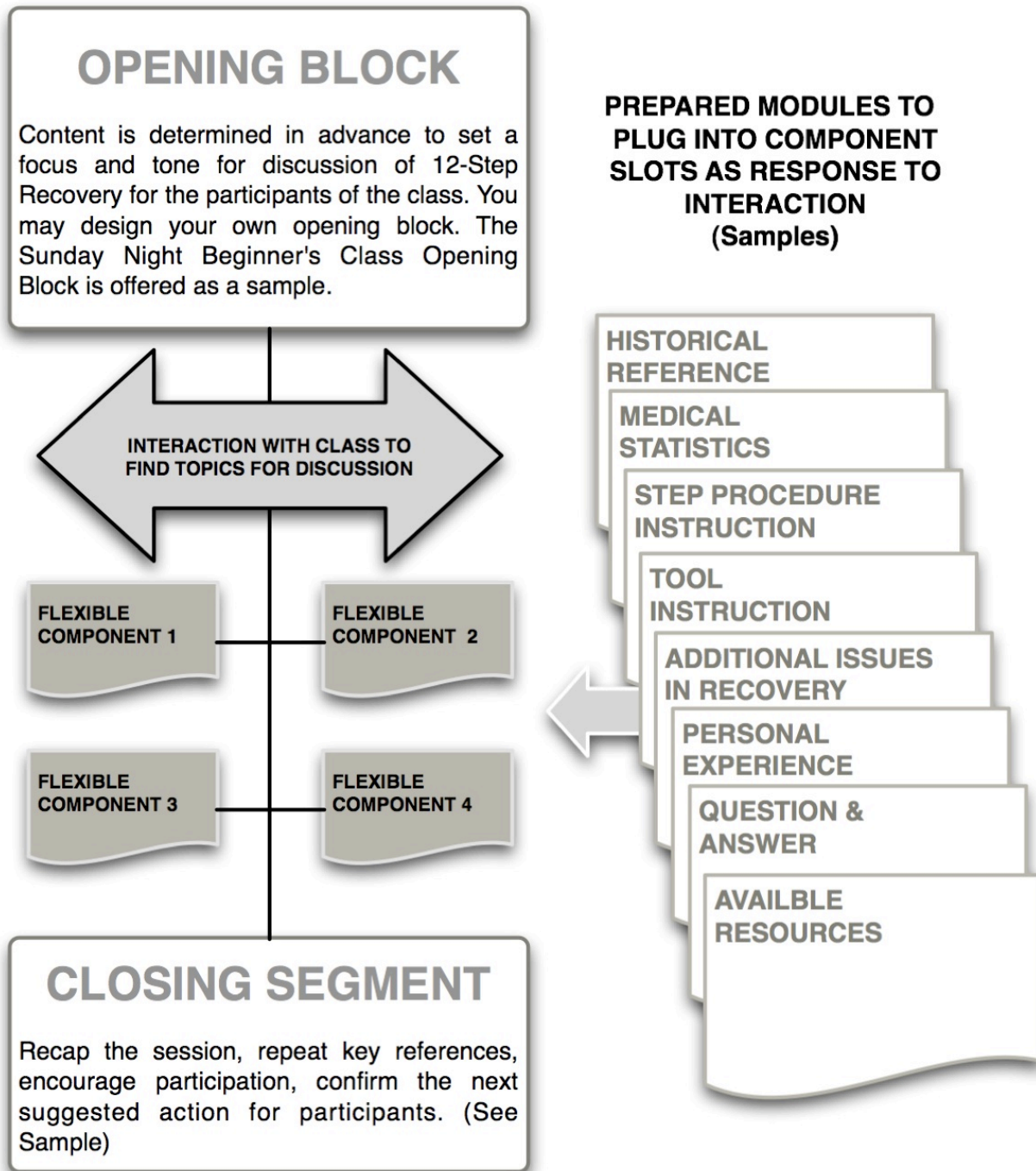
Remember that we are dealing with alcoholics either new to Recovery and discovering the 12-Step process for the first time, or we are dealing with someone who had previous experience with AA but are now coming off a relapse. They are on the defense and, if they have achieved the necessary “desperation of drowning men”, we can provide relief by allowing them to find some bit of hope in the answer to our questions.

Structure

A structure for the Beginner's Class provides a great deal of flexibility. Framed with an Opening Block, a Closing Segment, and loaded with optional Modules, the class can serve to lead any discussion to the topic of Recovery and show how the participants can become active in their own Sobriety and Recovery.

This is a visual representation of the structure for the Beginner's Class.

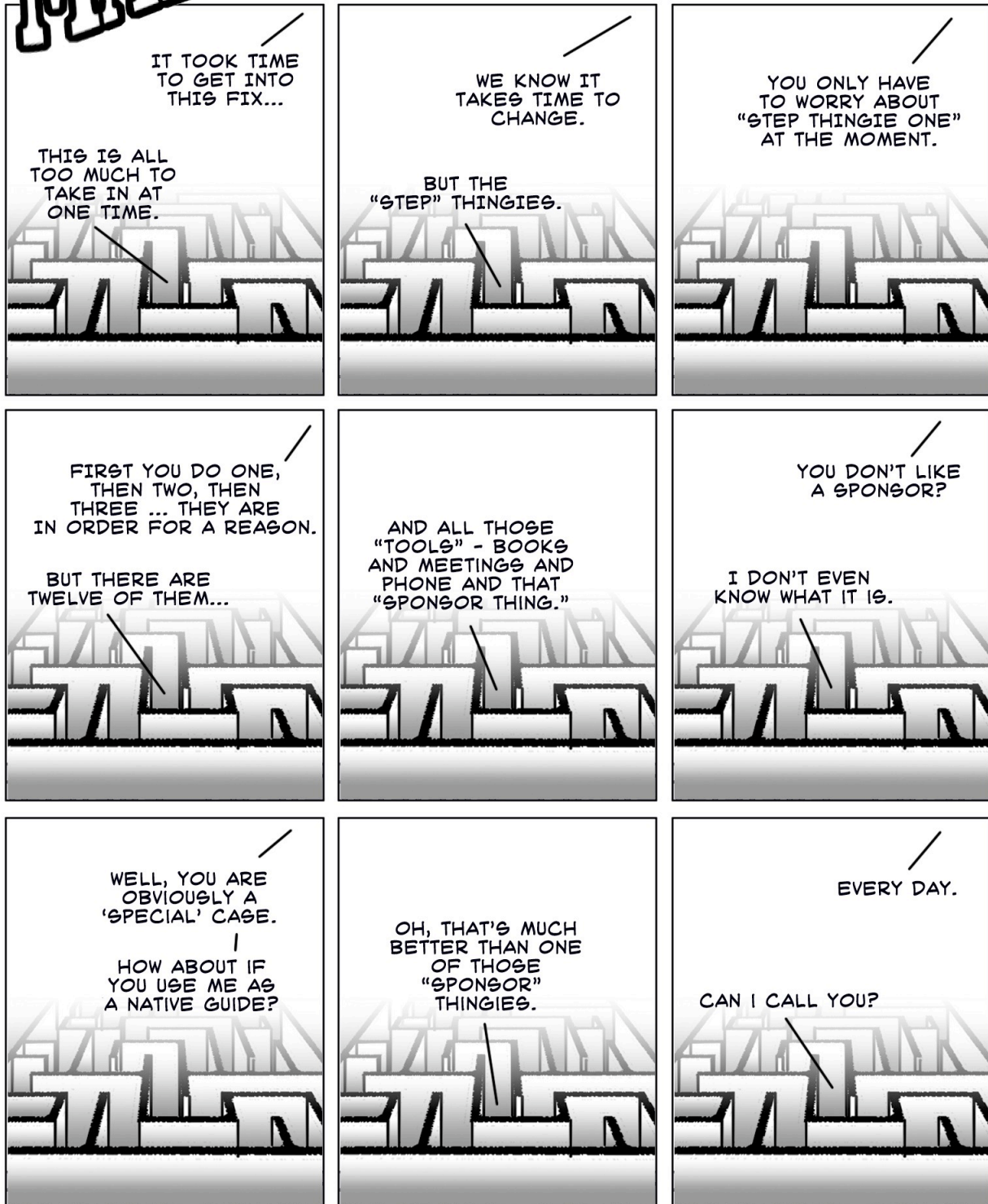
CLASS STRUCTURE



MAZING RECOVERY

ALL IN THE NAME

BY JOE A.



The Opening Block

Sessions should begin with a set piece. This should be 10-20 minutes of introduction to Recovery, Steps, and the History of those topics. A sample opening block is provided in the next section, but as with all aspects of this beginner's class, you can tailor your message to the men and women who will be the participants of your class.

The approach during the Opening Block will set the tone for the session. If you set yourself as an authority, you stand a good chance of losing your audience. The goal is to "carry the message", as it says in Step Twelve.

Many people who try to carry the message do not realize that they have preconceptions of what the newcomer knows. I've learned to call these "hoops" the newcomer must jump through before the wise old-timer will grace them with the message.

You will hear "If they don't have a Sponsor, they're not serious." If they have never heard of Sponsorship, they won't have one, won't tell you they don't know what you are talking about, and become defensive. A teaching opportunity will be lost.

You will hear "If all the God talk runs them out, drugs and alcohol will run them back in." Drugs and alcohol will kill some of them before they make it back. You may be their only contact with Recovery before their last spree.

Remember your newcomer, even if they have prior time in sobriety, cannot be assumed to know any of the points you are presenting.

Carry the message to them, lay the set of spiritual tools at their feet, and let them decide if 12-Step Recovery is for them. Make

it clear it is their job to pick up the tools to succeed.

Sample Opening Block

Since this class was developed as part of an institution, it is important that we clarify that 12-Step Recovery through AA (or NA) is not the same thing as their institution. The idea that the participants are the ones who will decide whether they are an alcoholic, need what we offer, or is in enough pain to begin, we are there to carry the message.

The opening for the class begins with this outline:

1. We open with the Serenity Prayer. It is a custom in meetings in this area and we try to respect local custom. If you do not want to say the prayer, we don't force anyone to do anything.
2. We introduce ourselves and invite the participants to introduce themselves. They are not required to say they are an alcoholic (or an addict) at this time – this is just a comfortable "hello." If someone doesn't want to give their name, let them listen.
3. We make a statement to define that this class is not part of the institution where we hold the class. It is not an "AA Meeting." This is a beginner's class based on material from Beginner's Classes dating back to the 1940s. This is a place where we intend to:
 - a) Introduce them to 12-Step Recovery, AA, the Big Book, and "The Program"⁵
 - b) We hope to explain why the Big Book is the only real authority

⁵ At this point, we usually insert the dictionary definition of "program" – a set of instructions to be followed in the order that they are written to achieve a goal."

in our Program; that the experiences of individual members are just that. Their individual story.

- c) We plan on “laying a set of spiritual tools” at their feet. They have control of whether they pick them up or not.
- d) We will give our definition of alcoholism to allow them to determine, for themselves, if they are an alcoholic (or addict) or not.

We emphasize the book and how our instructions come from that book, and how those instructions are carried out.

Make Your Points

After your opening block, you can make your Points. At this point, we suggest you be clear on your role as representing one person in Recovery. When the class is conducted by three people or more, it presents a better view of how interaction is crucial to the success of the class engaging participants.

After we make points, we ask questions. These points are intended to define alcoholism by its physical, psychological, and spiritual responses to alcohol.

Focus your Opening Block to present information, not a direct confrontation with the participant about his or her acceptance of a personal diagnosis.

The points in the current class are as follows, but your class may choose to make other points the opening discussion.

POINT #1

The normal reaction to alcohol is as a depressant. Non-alcoholics slow down after one drink, and if they have three they want to go to sleep. Our reaction is one leads to four

leads to eight and we become more active and feel freer to do what we want to do, regardless of the consequences.

That is the unnatural physical reaction to alcohol, which marks the physical aspect of alcoholism.

POINT #2

When presented with the problems alcohol can create with their relationships, their health, their finances, and their reputation, the non-alcoholic stops drinking or sets reasonable boundaries that they are able to respect.

When we have problems with relationships, health, finances, reputation, or the law, we are still unable to stop drinking, or we set boundaries for our drinking that we must change constantly. Most of us report a mental obsession with the next drink, or fear of not being able to get the next drink.

This indicates the mental obsession and lack of control over our psychological response to alcohol is the abnormal psychological aspect of alcoholism.

POINT #3

If you find that you have the disease of physical reaction and mental obsession of alcoholism, do you understand that alcoholism is no longer a question of moral failing or lack of will?

...

While Alcoholics Anonymous makes it clear that we have no monopoly on freedom from the physical addiction and mental obsession of alcoholism, the 12-Step Program that is the core of AA marks the first time we have had a system that, if followed as written in the book Alcoholics Anonymous, will work to deal with the results of separation from alcohol.

When alcohol is removed, the real problems that drive an alcoholic to the first drink,

surface and it is the purpose of Alcoholics Anonymous to find “a design for living that really works” in the face of the new awareness that comes with Sobriety.

Be careful not to jump ahead in the steps. The participants in your class will be wrestling with the first Three Steps, so keep your focus on those Steps.

When you have presented these opening points to the participants, try to explain some points that would be true of *any* alcoholic. Do not be surprised if some of your participants take any discussion of alcoholism as a personal attack. This is common in early Recovery.

Some Questions to Identify the Need for Recovery

QUESTION #1:

Does the background for an alcoholic sound like what you have experienced?

QUESTION #2

When you need to stop, or decide to stop, do you find that you have little or no control over picking up a drink, or find that you drink more than you planned on drinking?

QUESTION #3

Do you understand that the First Step does not create alcoholism? If you were behaving the way we have outlined, feeling the feelings we are discussing, and been unable to succeed with lasting Sobriety, that the First Step is a simple statement of what is already true?

QUESTION #4

Do you understand that the physical reaction to alcohol is unnatural and beyond your control?

QUESTION #5

Do you understand that your desire for more and more, once you have had a taste, is a

physical addiction that is beyond your power to control?

QUESTION #6

With what we have discussed, the physical reaction being abnormal, the mental obsession being abnormal, do you feel that you are an alcoholic?

At this point, it may be appropriate to go around the room, as we did with introducing ourselves, to make a simple “yes” or “no” answer to Question #6.

If you have a way to get to the admission of the First Step that you feel is better, by all means, go with what you feel will make the best approach to the First Step.

Interaction & Modules

Do not be surprised if some of the participants are unwilling to admit that they are alcoholics. “God will constantly disclose more to you and to us...” (*Page 164*). Take your cue from the positive of anyone admitting to their alcoholism and plunge forward into solutions to the problem to which they have just admitted.

Those who did not admit to the First Step will be listening while you move forward with the others. They may need more experience in the problem and the hopelessness of active alcoholism, but we cannot make those who are ready and who have taken their First Step wait.

Explain that more detail for the First Step can be found in the first 44 pages of the book, but for the moment we look at Step Two.

Take them to page 45:

“Lack of power, that was our dilemma.”

Or, you may want to take them to page 163:

“We know what you are thinking. You are saying to yourself: ‘I’m jittery and alone. I couldn’t do that.’ But you can.

You forget that you have just now tapped a source of power much greater than yourself. To duplicate, with such backing, what we have accomplished is only a matter of willingness, patience, and labor."

At this point you are in a good position to start interacting with the participants to see what topics are going to be most valuable in overcoming the newcomer's fears or objections to what is to come.

Remember, we are trying to get the participant to become part of their own recovery by engaging them in direct question and answers. The system works best when the questions and answers go both ways. Be open and willing to listen to their questions, too.

Engaging the Participants

You can ask a few casual questions to find out what Step holds the most fear for them, what they are convinced they will never be able to do, or what other questions they may have about what comes next.

You can also invite them to ask whatever question is bothering them about AA, alcoholism, or their role in their own Recovery.

Contradiction

The class is actually based on the Improvisational Technique, which is most

often used in improv comedy. The basis of this system is to always build on what was said. *Never contradict the comment or question.*

Improvisation is built on "Yes, and..." and never "No, but..." This means you can make comments that lead the conversation to a positive point based on a negative or completely erroneous statement.

Whenever possible, turn questions, even those that may seem non-productive, into a teaching opportunity. Take the question as the jumping off point for more information about the Program and Recovery.

When the participant sees that his or her comment has shaped the direction of the discussion, when their questions are not ridiculed, and when they are not made to look foolish for asking a question, they feel they have made a difference in the way the class proceeds. They become more invested in the process and lower their defenses.

This might allow a bit of Truth to slip through their defenses.

The Closing Segment

You can design a closing segment to suit the needs and philosophy of your group.

The Class Outline (Summary)

Opening Statement

A. Non Affiliation Statement

B. Choice to Participate

C. Opening Prayer (choice)

The Serenity prayer

Introduction

Opening Block

Engagement

Invitation to ask Questions

Conversion of Questions to Positive
Discussion Points (Improvisation Technique)

Modules

Respond to each topic raised with:

Conversion to Positive talking point

Direct answer based on prepared modules; or

Admission that you do not have that answer
handy, but that we can find someone who
does.

Closing Segment

What is the participant's next action?

Hand-outs, if any, to take with them

Statement of Anti-Ego

"Nothing you heard tonight is from me. This
is the result of XX years of listening and
reading and prayer and working Steps with a
Sponsor. I'm not that good - I've just had
some great teachers."

Closing Prayer (Optional)

Sample Exchanges and Components

These are not formal, written responses to questions. These are chunks of information that the leader or teacher of the class or workshop have prepared as responses to questions that have come up in previous sessions. It is the information of each module that is important - not the prose presented in the example.

Sample Comment: *“I’ll never be able to do Step Four...”*

Sample Step Four Module:

When the time comes, when you have really done Steps One, Two, and Three you will be able to do the next step. You might even look forward to it.

There is nothing in Step Four you have not already thought about. The purpose of Step Four is to get them out of your head and onto paper, where they stop moving. When we only tell and retell our story, our version changes just a little every time we tell it.

By writing it all in one place, you see what a big steaming pile your life has become. When you see that pile, you’ll be ready to sit down with your sponsor or the person with whom you do Step Five, to have them help you make sense of what is there.

Sample Comment: *“I’ll never be able to do Step Five...”*

Sample Step Five Module:

In Step Five, you get to see your steaming pile in 3D. You need two eyes to see things in 3D, so you need a second viewpoint to see your Fourth Step in three dimensions. The person you’re doing Step Five with will have some experience and be able to help you separate the things that come up:

- a) What is yours and what is not? We tend to become the center of the universe (we think) and everything is about “me.” We take on responsibility for other people’s thoughts or actions, or try to escape our own responsibility by claiming it was really so-and-so, not “me.” You may be surprised to see what gets taken out of your Fourth Step, and what remains.
- b) Not everything in your Fourth Step are bad things. The Big Book and the Twelve and Twelve both tell us we must inventory our assets, too. That is not to pat us on the head so we don’t feel bad about the bad things that come up. The purpose of identifying assets is to see where we were given gifts or developed good abilities, and usually how we have not used these assets properly, or turned them into a weapon against other people.

- c) We hear the person we have chosen for our Fifth Step share his own experience with the issues we are facing and are surprised to find how we have reacted as simple humans, not monsters or saints. We find that we are imperfect, as are the other people in AA, but need to take responsibility for what is ours, discard excess baggage that is not ours to repair, and identify all the aspects of our lives, good and bad.

Sometimes a participant will challenge you with a rumor he has heard about AA? Answer that rumor truthfully; either with the facts and cite your source for your answers, or admit you do not have the answer now and agree to look for the real story behind the rumor.

Sample Rumor: “I heard Bill Wilson used LSD and other drugs.”

Module Response:

Yep. In the 1960s, before Timothy Leary and black light posters, researchers believed LSD would be useful in treating alcoholism and depression, and might be a tool to use in finding the “Spiritual Experience” most AAs were seeking. Bill took LSD under supervision, often with Aldous Huxley (author of “The Doors of Perception”) in California. Lois participated in some of those lab sessions.

The story is in Chapter 23 of Pass It On, which is Bill Wilson’s history of AA. When it became controversial, Bill stopped participating in the experiment. It is also covered in Ernie Kurtz’ unofficial history of AA, “Not God.”

In other sessions, you may have someone who wants to explore some non-recovery related question, or wants to show how smart

they are by asking a question to which they already know the answer, but want to have the chance to be the one to tell the class.

There are different responses to different types of off topic questions.

Sample Question: “Isn’t it true that Bill Wilson was in the Masonic Lodge?”

Module Response:

I really don’t know. It’s never been part of my understanding of how to do the Steps or to deal with my own Recovery. But I’m sure it has been documented if it is true.

Does that change whether you will do your Steps, or the information being presented here? Can we focus on Steps and Recovery?

Sample Question: “Shouldn’t alcoholism simply be classified as a Mental Illness?”

Module Response:

I’m not a medical person and am not qualified to diagnose either medically or psychiatrically. The AMA (American Medical Association) does define alcoholism as a separate diagnosis with mental and physical factors. The mental obsession might be on the level of a mental illness. An alcoholic can have additional problems, such as schizophrenia, neurosis, etc., but that does not change the diagnosis of “alcoholic.”

Would you use the fact the disease is not classified the way you want it to be classified as a reason to not do the Steps? If you think psychiatry would help you more than the Steps, you are free to try that.

I, personally, have done three rounds of psychotherapy and several class/

workshop sessions in sobriety. I found having my AA program in place, and telling the doctor the truth (which was a whole new concept) to be very useful in getting the benefit of a good therapist.

Sometimes the question will be heartfelt and, if you have made the class a safe place to ask real questions, may be instrumental in helping the participant overcome his or her block on doing the work of Recovery.

Sample Question: *“I was looking at the prayers and I don’t understand all that “thee” and “thine” stuff. What does that mean?”*

Module Response:

It would never have occurred to me to ask that question. I was raised in a good, church-going family and “thee” and “thine” were part of the language from the very early days.

Let’s take the suggested Third Step prayer Page 63:

“God, I offer myself to Thee – to build with me and to do with me as Thou wilt. Relieve me of the bondage of self, that I may better do Thy will. Take away my difficulties, that victory over them may bear witness to those I would help of Thy Power, Thy Love, and Thy Way of life. May I do Thy will always!”

Now, let’s do that in current English to get the meaning without the 16th Century English.

“God, I offer myself to You – to build with me and to do with me as You will. Relieve me of the bondage of self, that I may better do Your will. Take away my difficulties, that victory over them may bear witness to those I would help of Your Power, Your Love, and Your Way of life. May I do Your will always!”

If you have a more personal way to phrase this prayer, so that it is clear to you and you mean the words, you have an obligation to make this prayer as strong as you can.

From these examples, you can see that the “Modules” are topics that are either thought of in advance, including a short response, with a citation, if appropriate.

Questions for my personal set of modules have come from Meditation, from Reading the Big Book, and other Recovery publications, from the participants of my previous Beginner’s Classes, from discussion with others in Recovery over coffee, or from meetings beyond these classes.

Remember, you are not perfect and don’t pretend to be. If you are found to be presenting a false front, it will damage your message. Your effort is supposed to be based on Carrying the Message.

We will look at other existing modules in the next section.

More Sample Modules

Before AA

There is nothing new about alcoholism. It has been with us since the first man planted crops instead of chasing game. Our first crops were grain, which we grew for bread and beer.

From the very beginning, there were those who could not handle beer.

Later, we grew fruit and pressed wine, and there were more who could not handle the wine.

Still later, we distilled spirits, and the plague of alcoholism descended and settled in to stay.

Alcoholism is documented throughout history without effective solutions. Public shame, logic, punishment, imprisonment, asylums, and even death have been the responses, but none have had effect with “alcoholics of our type.”

Religion and Alcoholism

Every culture has had something to say about alcoholism. For Christians and Jews, it can be found in the Old Testament, Proverbs 23:20-31, they say:

²⁹Who hath woe? Who hath sorrow? Who hath contentions? Who hath babbling? Who hath wounds without cause? Who hath redness of eyes?

³⁰They that tarry long at the wine; they that go to seek mixed wine.

³¹Look not thou upon the wine when it is red, when it giveth his color in the cup, when it moveth itself aright.

³²At the last it biteth like a serpent, and stingeth like an adder.

³³Thine eyes shall behold strange women, and thine heart shall utter perverse things.

³⁴Yea, thou shalt be as he that lieth down in the midst of the sea, or as he that lieth upon the top of a mast.

³⁵They have stricken me, shalt thou say, and I was not sick; they have beaten me, and I felt it not: when shall I awake? I will seek it yet again.

In Buddhism there are the Five Precepts by which you are supposed to live:

Avoid Killing,

Avoid Lying,

Avoid Stealing,

*Avoid Sexual Misconduct, and
Avoid Intoxication*

Islam teaches that believers are to abstain from alcohol in all its forms. (The word “alcohol” is from Arabic.)

Native Americans did not have exposure to alcohol and when it was presented to them, they had no defense against alcoholism. Associated Press, 8/28/2008. Federal Centers for Disease Control and Prevention reported 11.1% of deaths in the Native American Community, versus 3.3% among the non-Native population.

The Associated Press, on 8/25/2009, reported drinking caused more than half the deaths among Russians aged 15 to 54 in the turbulent era following the Soviet collapse. Russian alcoholism remains severe and a grim joke from Russia says “What stage comes between socialism and communism? Alcoholism.”

One in 25 deaths around the world is caused by alcohol consumption, and booze is now as damaging to global health as tobacco was a decade ago, according to a new study in the British medical journal the Lancet (June 29, 2009).

The “Why?” of Alcoholism

Throughout history, there have only been three answers to Alcoholism:

- 1) It's a Sin, Stop It!
- 2) You're Selfish; Stop It!
- 3) You're Crazy; there's nothing anyone can do.

Spontaneous recovery through spiritual means occurred, but not as a consistent solution – just an occasional gift from God. It was the alcoholics fault if he/she did not choose to give up their sin.

At the end of the 19th Century, a new answer appeared:

- 4) It's a subconscious drive.

A combination of spiritual teachings and psychiatry was the foundation of work by “the Emmanuel Movement,” first with victims of tuberculosis and later with alcoholics through a sub-group, “The Jacoby Club.”

In the early 20th century, scientific investigation brought about a fifth answer:

- 5) It's a disease.

The AA approach is to combine these answers to treat alcoholism as a three-part disease with:

The Spiritual Component
(Disconnection)

The Physical Component (Addiction)

The Psychological Component
(Obsession)

Washingtonians

During the early 19th Century, six drunks from a bar in Baltimore, MD, decided they would go to a local Temperance lecture and heckle the speaker from the audience. After the lecture, they returned to the bar and discovered that they could stop their own drinking if they talked with each other about the reasons they felt they drank.

People moved away and started new groups in other cities. Visitors became impressed with the success of the new non-drinkers and carried the idea to still more groups that were started. By 1842, a large network of these meetings existed across the US and they decided to have a day of celebration. Letters went out declaring:

- a) The groups would be known as the Washingtonians (named for Martha Washington, known for her temperance leanings) and
- b) on George Washington's birthday (February 22, 1842) they would hold a national day of celebration. Groups were encouraged to host a picnic with speakers and general fellowship.

The speaker at the Springfield, IL meeting was a young Abraham Lincoln, who is recorded as saying:

"If we take habitual drunkards as a class, their heads and their hearts will bear an advantageous comparison with those of any other class. There seems ever to have been a proneness in the brilliant and warm-blooded to fall in to this vice. The demon of intemperance ever seems to have delighted in sucking the blood of genius and generosity.

*~Abraham Lincoln,
to the Washington Temperance Society,
Springfield, Illinois, 22 February 1842*

But the rising popularity of the Washingtonians attracted the wider Temperance movement and they stopped being a society of drunks helping other drunks stay sober, to a society lecturing on the evils of alcohol and later, other evils.

Founded on the success of the original Washingtonian group, the new Washingtonians crusaded in the war of Temperance on King Alcohol. Their popularity grew until, in 1852, they claimed to have 5 million people to have signed the Pledge, but you did not have to be an alcoholic to sign the Pledge. A Pledge was simply a paper that said you did not support the manufacture, sale, distribution, or use of alcohol. School children and others signed, but a block of 5 million could have a great deal of political importance.

The Washingtonians expanded beyond alcohol, to spread themselves to the issues of Slavery, pro and con; the gold standard, pro and con; and the admission of Texas to the Union, pro and con.

They argued in their meetings, their public lectures flourished, then declined when the public tired of the public arguments. All of the good that could have been done was destroyed by their lack of unity. By 1861, at the start of the Civil War, they were gone. You could not find a Washingtonian group. They had died away.

We will never know how many alcoholics were lost because we do not know how many of the 5 million were actually alcoholics, but all the good they had done was swept away with the failure of that early fellowship.

Bill Wilson did not know about the Washingtonians when AA was first forming. He came to the conclusion the Washingtonians failed because of their lack of unity and lack of focus. The groups competed

with each other for members. They debated issues in public, and divided along the pros and cons of those issues.

Psychiatry

In the earliest days of alcohol, there were just the three responses to the disease: it is a sin (stop it); you are selfish (stop it), or you are crazy.

The rise of psychiatry in the late 19th Century provided a fourth answer – the sub conscious. You may be doing things for reasons you do not understand, or even know about. This concept is so prevalent today it is hard to imagine there was a time when it was not there.

But at the turn of the 19th and 20th Centuries, this was a new idea. With other scientific thoughts of the day, it was believed that psychiatry was the key to all man's emotional and mental problems.

Since we now believe that alcoholism has several components – physical, mental, emotional, spiritual, and behavioral – we feel this is a simplistic approach. But in its day it was a major advance in the response and treatment of alcoholism.

Emmanuel and the Jacoby Club

In 1906, the Emmanuel Episcopal Church, under the direction of Dr. Elwood Worcester and Dr. Samuel McComb, began a new ministry to combine psychiatry and spirituality in the treatment of a dreaded disease of the time – tuberculosis. Tuberculosis (or TB) was rampant and had the same emotional impact on families and neighbors as AIDS had in the late 20th Century. This group was dubbed The Emmanuel Movement⁶.

Victims of the disease were shunned, isolated, and abandoned. Fear of contracting the disease dictated public policy and private conduct. The victims were generally left to die on their own.

But the Emmanuel movement taught that with a combination of psychiatry and their focus on faith, it was possible to live a life and be restored to the maximum productivity possible, even with the disease.

When they met with success with their “class” for victims of TB, they opened their class to “emotional problems” and a significant portion of the people who attended (some estimates say 80%) were alcoholic. The combination of spirituality and psychiatry proved to be effective in getting these newcomers sober and help them remain sober using the movements method.

To their credit, and unlike the failed Washingtonian movement of the mid-19th Century, the Emmanuel did not try to put all their eggs in one basket and created a new sub-group specifically for alcoholics.

This new group was dubbed “The Jacoby Club” under the sponsorship of rubber merchant Ernest Jacoby, with weekly “Men

Meeting Men” group sessions for alcoholics in the church basement.

It was members of the Jacoby Club who told the businessman mentioned in the Big Book (Rowland Hazard) that there was nothing they had to offer that would help him. It was their suggestion that Rowland enter real psychiatric therapy with a real therapist if he hoped to ever find and maintain sobriety.

The Jacoby Club continued until 1989, but with the availability of Alcoholics Anonymous, made its weekly sessions unnecessary.

⁶ Drawn from the en.wikipedia.com entry for “The Emmanuel Movement”.

The Oxford Groups

Frank Buchman, an Episcopal minister from the United States and serving at a boy's school in Keswick England, had a conversion experience and began a group he dubbed "A Century Christian Fellowship." Under his leadership, the group took teams of like-minded believers to China, Africa, India, and the United States. The group functioned as they imagined believers lived in the 1st Century. They received no salaries, held no positions, and were dependent on those with whom they fellowshiped for food, shelter, and transportation. Fortunately, Oxford Group members were very well situated and were seldom lacking for accommodations.

While a group of the First Century Christian Fellowship travelled in South Africa, a reporter asked a train porter how to find them. The man responded, "Oh, you mean the Oxford Group"⁷, indicating the luggage which had Oxford stenciled on all the bags. The reporter used that name to refer to the group and it stuck.

The group was unlike other forms of evangelism in that it targeted and directed its efforts to the "up and outers", the elites and wealthy of society. It made use of publicity regarding its prominent converts, and was caricatured as a "Salvation Army for snobs." Buchman's message did not challenge the status quo and thus aided the Group's popularity among the well-to-do. Buchman made the cover of Time Magazine as "Cultist Frank Buchman: God is a Millionaire" in 1936. For a U.S. headquarters, he built a multimillion-dollar establishment on Michigan's Macinac Island, with room for 1,000 visitors. From Caux to London's Berkeley Square to New York's Westchester County layouts, Buchman and his followers had the best. In response to criticism,

Buchman had an answer, "Isn't God a millionaire?"

Buchman became a favorite of highly-placed men and women and frequently held audiences with Presidents, Kings, and world leaders. After meeting with Buchman, Mahatma Gandhi told reporters "people need to listen to this man. He has the first great idea to come out of the West."

After a meeting with Adolph Hitler, who Buchman had hoped to convert, the Oxford Group received negative publicity as Nazi sympathizers. The Oxford University demanded they stop calling themselves "the Oxford Group" and the name was changed to "Moral Re-Armament", the MRA.

With the death of Frank Buchman in 1961, the group lost much of its reputation on the world stage, although it still exists under the name Initiatives of Change (www.us.iofc.org/).

Members of what would become AA were members of the Oxford Groups and we owe much of our structure and methods to that earlier group.

⁷ Drawn from the *en.wikipedia.com* entry for "Oxford Group".

The Oxford Group System

THE FOUR ABSOLUTES

The Oxford Group taught a focus on a personal relationship to God through an effort to achieve Four Absolutes.

- *Absolute Purity*
- *Absolute Honesty*
- *Absolute Unselfishness*
- *Absolute Love*

While perfection was not likely, the need to struggle in that direction was still necessary.

THE FIVE CS

The Oxford Groups also taught “Five Cs” to illustrate their program of spiritual growth.

- *Confidence*
- *Confession*
- *Conviction*
- *Conversion*
- *Continuance*

THE PRACTICES

Members of the Oxford Group had several daily practices that they used to maintain their focus and their growth.

Quiet Time – a period of quiet meditation, reflection, and prayer, usually every morning.

Guidance – the process of praying, meditating, and when you feel your prayer had been answered with “Guidance” or direction for your actions, you checked your Guidance with other people, lest your ego deceive you into inappropriate action.

AA has continued stressing the practices of daily quiet time for prayer and meditation, but successful members also report some sort of Checking also be used, either through meetings or one-on-one discussion with a sponsor or other members.

AA Path

At the time of AAs early formation, the Washingtonian Movement was not directly linked to AA growth.

The AA lineage is carried through:

SIGMUND FREUD – The publication of *Interpretation of Dreams* led to an understanding of subconscious motivation in unhealthy behaviors, including alcoholism.

THE EMMANUEL MOVEMENT – Emmanuel Episcopal Church in Boston took ideas of Freud’s psychiatric approach with elements of spirituality to carry the idea of living a full and balanced life, even though carrying a disease to patients in a local Tuberculosis war. When this process found success they opened a new “mental problems” group and the majority of men appearing were alcoholics. A new group was formed, financed by rubber magnate E. Jacoby – The Jacoby Club.

THE JACOBY GROUP – Rowland Hazard attended the Jacoby Group in Boston and was told that his alcoholism would not be helped by their group; he needed serious psychotherapy from a real doctor.

ROWLAND HAZARD – Rowland was taken to Europe by his father and brother. When Freud refused him as a patient, Rowland was taken to Karl Jung’s sanitarium in Switzerland, where he was confined for almost a year.

KARL JUNG – Dr. Jung’s therapy was not as a “hard science,” but more subjective than the strict interpretation of Freud. He worked with Hazard until they agreed that he had learned as much as Jung could offer. Hazard was sure that his self-knowledge would allow him to stay sober.

Hazard returned to America and was drunk on the boat before it docked in New York. He

took his wife and son to New Mexico, but his father and brother eventually returned him to Jung. Jung said he had nothing more to offer, but that his therapy had been attempting to bring Hazard to a major psychological rearrangement. He told Rowland that throughout history a spontaneous spiritual experience had saved a select few from alcoholism. But his efforts to bring about such a change in Rowland had failed.

Jung advised Rowland to find a spiritual practice to help him find such an experience.

THE OXFORD GROUP – Rowland Hazard found an “Oxford Group” in London and began attending. He remained sober. When he returned to New York, he continued attending. When Rowland had a few months of sobriety, he and two friends went to get Ebby Thacher out of involuntary commitment in Vermont, where Ebby’s recurring drunken behavior had reached the limit of his judge’s tolerance.

EBBY THACHER – Ebby came to New York with Rowland as part of his agreement with the Vermont judge to leave his jurisdiction. Ebby began attending Oxford Groups with Rowland and remained sober.

Ebby then carried the message to Bill Wilson, which is where most people agree the story of Alcoholics Anonymous begins.

Questions are raised as to why Bill Wilson, and not Ebby or Rowland, is considered the key starting point for Alcoholics Anonymous.

Rowland Hazard’s desire to stay sober was fleeting and he had tried many previous methods. His brother and his father were the driving force of his European stay with Dr. Jung. When Rowland found sobriety through the Oxford Group, as part of his review of his past and the damage he had done, he committed to remain sober for his mother. He said he wanted to give his mother some good memories before she died. She had been put through so much by his drinking.

Rowland Hazard died sober.

Ebby Thacher stayed sober during the critical period of transmission of the message to Bill Wilson, but did not remain sober. His initial sobriety was based on fear of involuntary commitment to an asylum for the rest of his life. Ebby later drank, got sober again, drank, and got sober again several times. He spent most of his final years with a Texas AA community who cared for him when he relapsed and praised him while sober.

Ebby died sober at a health farm in upstate New York, but begged for a drink at the end.

More on the Oxford Groups

- Called “First Century Christianity Association.”
- Principles of no positions, no salaries, no prestige; Four Absolutes, Five Cs, and Four Step process.
- Dubbed The Oxford Group by South African reporter.
- The “Up and Out” membership; Principles.
- World Leaders.
- Gandhi – “The world needs to listen to this man – he has the first good idea to come out of the west.”
- Attempt to convert Hitler resulted in bad publicity for Oxford Groups. Oxford University demanded they change their name. Became MRA, “Moral Re-Armament.”
- Rowland H. finds the Oxford Group.
- Rowland takes Ebby T. from Vermont and Ebby begins attending meetings in the Oxford Groups.
- Ebby T. carries the message to Bill Wilson.
- Bill gets sober and begins attending Oxford Groups with his wife, Lois.
- Bill gets in touch with the Oxford Group in Akron, connects to Dr. Bob (through Henrietta Seiberling).
- Bill and Dr. Bob start “the alcoholic squad” of the Oxford Group. Friction begins with OG Members.
- Big Book begins while still in the Oxford Group.

Friction with the Oxford Groups

Meetings were held in members’ homes and they did not like the “class of person” being brought through their drawers.

Dr. Bob was told, “You are glorying in your sin. My tobacco is every bit the sin your alcohol is.”

Bob’s answer was “Your tobacco will not send you to the prison, the gutter, or the grave.”

In New York, Bill Wilson and his wife, Lois, were effectively ostracized from their local group because of Bill’s insistence of finding and working with alcoholics.

Both Bill and Bob remained devoted to the Oxford Group’s principles and practices, but the friction continued to develop.

Birth of the Big Book

The only meetings were in New York (under the direction of Bill Wilson) and Akron, OH (under the tutelage of Dr. Bob Smith). Correspondence between the meetings developed three primary ideas to spread the word.

The Big Book was created by a vote of the young fellowship while it was still identified as part of the Oxford Groups and discussion with sober alcoholics in that fellowship.

In 1938, the “alcoholic squad” wanted to find a way to share their message to other alcoholics seeking sobriety. Three options were considered.

- a) AA Missionaries
- b) AA Facilities (hospitals, etc.)
- c) AA Book.

Option a was not chosen because those who made it into the Oxford Group fellowship had experienced many attempts to help them by well-meaning, religious people, but they ignored them. There was no reason to think that those still drunk would see AA missionaries as any different from the others.

Option b was not chosen because hospitals would be boards, prestigious titles, salaries, and the need to manage staffs, etc. It would take their focus from their message while presenting a danger to those who would be drawn into that world.

Option c was chosen.

The first idea was paid “missionaries” to carry the word of their system of recovery from city to city. It was voted down because the newly sober drunks had not listened to any other type of missionary effort to get them sober. It would also create a paid, “professional” class of AAs who would be perceived as setting

themselves above the common drunks they were trying to help.

The second idea was a new hospital that would offer counseling, medical detox, and financial, taking in drunks at one end and sending recovered alcoholics out into the community with their new, spiritual foundation to repair the damage they had done in their families and communities.

But a new hospital would restrict the recovery effort to those who could afford another hospital, and most of the drunks at the level where our founders began their recoveries were not at a point where they no longer had those resources. A hospital would also create a new danger with positions, names of letterheads, budgets, and public prestige.

The third idea was a book to outline their process and their stories.

Big Book Development

Bill Wilson fancied himself a writer. When the question of a book for the young fellowship came up, he began work on his own story, which would, of course, open the book.

The first man Bill helped get sober in New York was a businessman named Hank Parkhurst. Hank was running a car polish company out of New Jersey and had, among his skills from an erratic background, the knowledge of how to “package” a book. This means to coordinate a writer, an editor, a typesetter, a printer, a bindery, and a distributor to produce a book from the beginning until it was available to people to buy at newsstands.

When Hank saw what Bill had written he sat down and wrote out an outline of what needed to be in the book and in what order. He then made his secretary at the auto polish office available to Bill to type up what Bill wrote out in longhand.

Hank then stayed on Bill to complete the manuscript while encouraging many other members of the fellowship to write out their own stories (the beginning of the personal stories at the back of each edition of the book).

While the book was being written, Bill and Hank tried to drum up interest in the book with publishers. They did receive an offer from Harper & Row to publish the book, and were offered an advance against royalties of \$1500.

The offer convinced Bill and Hank that there was real potential in the sale of the book. \$1500 was more than most working people made in a year. The two began to develop a plan to publish the book themselves to allow control over what was published and to keep all the income for themselves.

While Bill was still writing, he and Hank created Works Publishing, Inc., and sold stock in the new company.

The “stock” consisted of a pad of blank stock certificates purchased from a local stationery store and on which they wrote “Works Publishing, Inc.” and valued the stock at \$25 each.

Many members purchased stock by paying in installments as low as 50¢ per month.

Hank Parkhurst

The first man to get sober with Bill W. in New York, Hank Parkhurst, had some experience with book packaging. Bill Wilson wrote a first attempt at his story for the Big Book and Hank responded with a 12-page outline of what should go into the book, in what order, and then did what was needed to make the book happen. It was not an outline of contents for the book, but the elements he felt needed to be included to make the book a success. The outline included some of his marketing ideas for the new book.

Hank owned a car polish business in New Jersey, which was on hard times with many others during the Great Depression. He made his secretary (Ruth Hock) available to type up Bill's longhand copy, and she in turn sent carbons of the manuscript to Akron for discussion by that group.

In late 1938, Hank arranged to have 400 copies of the original manuscript using a cheap printing process called "Multilith" (a brand name). His intent was to make money by selling the multilith copies of the manuscript for \$3.50 and a promise to include a copy of the hardback when it was published.

Not one copy of the book was sold. \$3.50 was exorbitant. At that time, a steak breakfast was 35¢, a movie matinee was 20¢, a lunch with two hotdogs and a cup of soda was 10¢, and a week in a reputable rooming house with your own bed and breakfast and dinner for seven days was \$3.50.

With the unsold copies of the manuscript sitting in the New Jersey office, the decision was made to send out copies to everyone active in the program at that time. Those trying to get sober, their wives, interested doctors, ministers, and anyone else interested was invited to review the manuscript and make comments.

Within 60 days, the comments came in and focused on the language. Bill Wilson's therapist, Dr. Harry Thiebolt, made the successful argument that the tone of the volume was too threatening. The manuscript was changed from the harsh direction of "You must do this" to the invitation of "this is what we have done."

The idea "if you want what we have you can do the things we have done," or "do the work and get the result" became standard in AA presentation.

Hank Parkhurst negotiated with Cornwall Printers in Cornwall, NY to typeset, print, and bind the book *Alcoholics Anonymous* in their "down" time, and the printer allowed Hank to pick up copies of the bound book on a cash basis. Cornwall warehoused the book and did not release anything that was not paid for before it left the shop.

Hank did not stay sober and died drunk. When he began to drink, he moved to Cleveland, OH, where he found a ready audience for his tales that Bill Wilson had embezzled money in excess of 40 times the actual monies received. His gossip found fertile ground, and the rumors survive to this day.

Research shows that his death was a result of an attempted acrobatic stunt while drunk.

The Twelve Steps

The Twelve Steps were not a part of the early process before the publication of the Big Book. The Oxford Group used a “six step” system that was not written down, but rephrased in various ways through the years.

In one of the meetings about the development of the book in Bill’s house on Clinton Street, both were becoming full of themselves and talking about putting “some of that spirituality stuff” into the book because it would help sales.

At that point, Bill’s wife, Lois, who had been listening from the kitchen, erupted into the discussion. Lois stuck her finger into Bill’s face and said, strongly, “If you keep talking like that, you’re going to drink!”

Overwhelmed with what that would mean, Lois burst into tears and ran upstairs, leaving Bill and Hank in an awkward silence. Hank excused himself and went home, leaving Bill to digest what had just happened.

Bill had been a member of the Oxford Groups for several years, and the OG had a system of prayer, followed by meditation. Bill retired to the bed he had built under the stairs, a necessity because Bill was too tall to stretch out on a regular sized bed. He prayed and meditated on the problem before him.

After about an hour, he sat up and took the yellow pad and pencil from their regular position on the table next to his bed, and began to write.

He broke down the Oxford Group’s Six Steps into smaller chunks and, when he was satisfied, he counted them and found Twelve Steps. Twelve appealed to him as a Christian, and he shared them with Hank Parkhurst and members of his New York Oxford Group. After Ruthie Hock typed up the Steps, a copy was sent to Akron for discussion.

The Steps, as they appear today, are only a few words different from the original longhand list.

The Multilith Big Book

When the manuscript was finished, Hank thought he had a way to make some money off the unpublished book. He had 400 copies reproduced in a cheap, water-based printing system called “Multilith.” His plan was to raise cash by selling these copies of the manuscript for \$3.50 each, with a promise that the buyer would get a copy of the hardcover as soon as it was published.

No one bought a single copy of the manuscript.

So, in January 1939, the decision was made to circulate these copies to the fellowship for review. Every sober member of the program, their wives (and husbands, because women were getting sober by now), and any professional willing to make comment, received a copy. Those professionals included doctors, ministers, business professionals, and spouses of sober members.

The 400 copies went out in January and in less than 60 days they received almost half of the copies back with suggestions for change.

There were very few suggestions.

It should be understood that among the fellowship in those early Oxford Groups were many “traveling men.” Traveling salesmen were a common profession, so men who had gotten sober in New York or Akron were responding from wherever they were on the road.

Responses and edits came from beyond New York and Akron, thanks to these traveling men. Copies were returned from Boston, Chicago, Detroit, St. Louis, Baltimore, and more.

A pattern developed that surprised the authors. Although the dozens of responders were separated in time and space, their

comments shared the same ideas in the same sections of the original manuscript.

The decision was made to record all these changes in one copy of the Multilith edition, and despite the lack of direct communication between the members making comment, they came to the same conclusions at the same point.

This proved to be the beginning of what was later called “group conscience,” but the changes to the document were recorded in one copy, which can still be found in the AA World Service Office archive. The changes to these few sections were so intense that the typesetter was unable to read the manuscript when the time came to cast the lead type for publication.

The most significant comment appears to be from Bill’s personal psychiatrist, who suggested the original finger-wagging-in-your-face tone of Bill’s first draft be changed to a simpler, invitational manner.

“You” and “You must” became “we” and a description of “what we did.” It was possible for the drunk seeking recovery to go through the book without feeling attacked. They were able to choose to do what the people in the book did, or not, with knowledge of the result, if their refusal to do what was required.

Clarence Snyder

In 1938, Clarence Snyder, a low-bottom alcoholic from Cleveland, OH, arrived in Akron to get sober with Dr. Bob and his Oxford Group “alcoholic squad”. His sister’s children used Bill Wilson’s brother-in-law as their pediatrician, and it was his discussion of Bill’s success with his alcohol problem that encouraged Clarence’s family to send him to Akron.

Clarence became sober with Dr. Bob and eventually was able to return to Akron, where another man getting sober with Dr. Bob allowed Clarence to stay in his home in Cleveland. Clarence arrived in time to receive a multilith copy of the Big Book manuscript.

When he returned to Cleveland, he tried to organize a new group, but found that most of the alcoholics he encountered were Catholics, and the local archdiocese had declared that the Oxford Group was not appropriate for Catholics. In fact, Catholics who attended the Oxford Group were threatened with excommunication.

In Akron, several Catholics were attending Dr. Bob’s meeting and Clarence began driving a group of newcomers to Akron for the Wednesday night meetings.

During this time, the friction between the Oxford Group and the growing, recovering community was increasing. One man told Dr. Bob “You are glorying in your sin – my tobacco is every bit the sin your alcohol is.”

Dr. Bob’s response was simple; “Your tobacco will not send you to the prison, the madhouse, or the gutter.”

On a March night, the tension was very high and Clarence decided he’d had enough. He announced, “Tomorrow night, in Cleveland, we will have the first meeting not associated with the Oxford Group. It will be based on

this book, Alcoholics Anonymous, and we will study what is in this book!”

In one move, Clarence established AA as a separate fellowship, and the focus on a Big Book study. The following night, Thursday, March 18, 1939, the first AA meeting was held in Cleveland.

Clarence also changed the meaning of “sponsor” to what we use today. Originally, a “sponsor” was the man who agreed to cosign your detox bill at St. Thomas hospital in Akron, who then agreed to work with you on, what we would now call, the “first Six Steps,” and then took the new man to his first Oxford Group meeting.

There was no open meeting list for the Oxford Group and you had to “know someone” to get in. The sponsor was ensuring that if you broke or stole something, he would be responsible.

Clarence changed sponsorship to one man (or woman, now that women were getting sober, too) with some experience in the program working with a newcomer.

This system worked to grow Cleveland meetings at a rate which surprised Bill and Bob. At the end of 1939, there was Meeting #1 in Akron; Meeting #2 in New York City; and Cleveland had meetings #3, #4, and #5. In the first few months of 1940, two more meetings formed in Cleveland.

Clarence was abrasive, actively disliked the Traditions, always introduced himself with his last name, and introduced himself frequently as “the man who founded AA.”

He has been slighted in official AA literature, but deserves recognition for his contributions for shaping our meetings, book studies, and sponsorship as they are now enjoyed by the program.

Separation from the Oxford Groups

In the few years the young fellowship existed within the Oxford Group, there was a constant friction between the overall spiritual focus of the OG and this new group's emphasis on alcoholism.

One member told Dr. Bob, "You are glorying in your sin. My tobacco is every bit the sin your alcohol is."

Bob's response was short and direct. "Your tobacco will not send you to the gutter, prison, or the grave."

During the ongoing friction between the "drunk squad" and the formal Oxford Group members, a man enters the scene that deserves some appreciation for his contributions to our fellowship.

Clarence Snyder was a drunk from Cleveland whose sister had found out about Dr. Bob and his sober drunks. She shipped Clarence off to St. Thomas hospital for detox and there Dr. Bob became his sponsor. When he left St. Thomas, he moved in with Dr. Bob, which was common in those early days.

While there, Clarence received his multilith copy of the manuscript and became familiar with the friction between the OG and the group of sober members of the "drunk squad."

When he returned to Cleveland, Clarence wanted to form a new group but found that the men he encountered who wanted to get sober were Catholic. The local Catholic archdiocese had threatened excommunication for members who attended Oxford Group meetings.

The archdiocese for Akron had not made that same determination so Clarence loaded his group of drunks into some cars and headed

down to Akron each Wednesday for their Oxford Group meeting with Dr. Bob.

In March of 1939, one of these meetings erupted into loud disagreement between the sober drunks and the traditional OG members. Frustrated with the conflict, Clarence announced that tomorrow night, in Cleveland, they would host the first meeting that was not affiliated with the Oxford Group and that they would use the book "Alcoholics Anonymous" as a guide.

The following night, Thursday, March 17, 1938, Clarence C. held the first independent meeting called "Alcoholics Anonymous" after the book. This early, separate meeting was based on prayer, meditation, and studying the book together.

In one swoop, Clarence established unaffiliated meetings, the tradition of studying the Big Book, and the name of the new fellowship, although it should be clear the name of the book came first.

Evolution of Sponsorship

Before we shift from Clarence's appearance in the growth of AA, we should also recognize that Clarence provided the model for what we now call "sponsorship."

In the Oxford Groups, your sponsor was the man who cosigned for your admission into medical detox. Drunks were notorious for not paying their bills and without a cosigner, the hospital would not admit them for alcoholism. Remember, at this time alcoholism was not a recognized disease and most admissions were for "gastric distress."

The sponsor then worked with the new man on what we would now call the first Six Steps. According to Clarence S., their first responsibility was helping the new man find his faith as a Christian.

This means that before the new man⁸ went to his first meeting, he had to be in a hospital detox with a Sponsor visiting to guide him and quiet time with prayer and meditation had been established. He worked with a sponsor successfully to admit his own alcoholism, turned his life and will over to his new understanding of God or Higher Power, made inventory of his past, shared it with his sponsor, and become willing to have his defects removed.

You could not simply "go to a meeting." There was no meeting guide. You had to know someone who knew. The sponsor also took responsibility for the man he brought to the meeting. If the new man broke or stole something, it was for the sponsor to set it right.

The new man entered his first meeting of the fellowship on his knees, praying with the group to have his defects removed. It was also

common in Akron for the "old men" of the group to take the newcomer upstairs to confirm that this candidate was an actual "member" of the group.

Clarence was responsible for changing this definition of Sponsor to a much simpler "someone who is ahead of you in the program and willing to show you what they had done," which is what we think of a sponsor to be now.

With Clarence's influence, the Cleveland Plain Dealer newspaper began running articles on Alcoholics Anonymous (written by a member of Clarence's group), the archdiocese approved the non-Oxford Group fellowship as appropriate for Catholics, and the Cleveland Fellowship grew at a rate that surprised Bill and Bob.

In 1938, there were two groups; one in Akron and one in New York. In 1939, there were five; three groups formed quickly in Cleveland without Bill or Bob to guide them, but with Clarence's push, the new form of Sponsorship and focused on Steps and the use of the Big Book for new members.

By January of 1940, two more groups had formed in Cleveland and as another landmark, the Cleveland Service Committee was the first service structure designed to serve AA.

When the Saturday Evening Post article by Jack Alexander appeared in 1941, it was estimated there were 400 members in the three cities (or traveling across the country on their jobs with one of those three cities as their base) who could count a year of sobriety or more. Immediately after the appearance of the article, the membership jumped from 400 to over 8,000.

⁸ Early members of what would become AA were all men. The story and process for women was later found to be the same as for men.

The new groups were founded on the Big Book for use as a group study focus and personal work on the Steps. There were so many new people that there were not enough Sponsors to serve everyone, and several of the fellowships began “Newcomer” or “Beginner’s” classes to introduce the new people to the tools of the program, the use of the book, the Steps, and getting into the new life.

The Recovery Reader is intended to follow that trail of shared sponsorship, education, and study.

The Explosive Growth of Membership

In 1940, a reporter for the Saturday Evening Post was assigned the story to investigate Alcoholics Anonymous. The author, Jack Alexander, was a muckraker who had just exposed the corruption in the mineworker’s union and fully expected to find another major scam in progress.

He attended a few meetings and was completely swept into a complete supporter of AA. His article appeared in the March 17, 1941 issue of the Saturday Evening Post, one of the most popular magazines of the era.

As a result of the article, the membership of AA exploded from approximately 400 at the time the article appeared, to over 6,000 in just a few weeks.

There were so many new members; there were not enough sponsors to work with the new members. The “Class” was developed in several different areas at about the same time. Committees formed to establish local service offices around the country, and many independent groups issued their own Recovery oriented materials, such as 24 Hours a Day, the Eye Opener, Stools and Bottles, and more than a dozen beginner class outlines.

Much of the material for this class has been taken from the 1940s writings of the Akron Group, the Cleveland Service Committee, and the beginner’s classes documented in Detroit, Chicago, St. Louis, Little Rock, Los Angeles, and elsewhere.

Hundreds of new groups were founded by individual alcoholics who ordered a copy of the book *Alcoholics Anonymous* from the New York service office, now dubbed the WSO (World Service Office), who proceeded to get sober and seek out other alcoholics to work with.

Rethinking Early Recovery Rates

In great angst and superiority, old timers complain that we are doing things wrong - that in the beginning, AA had a 75% success rate. Today various current recovery rates run between 5% and 35% (depending on the source or the viewpoint of the speaker).

The first question that is raised in this argument is how the statistics on an anonymous recovery group were collected.

It must be remembered that early AA was not like the current fellowship.

Members could only be admitted to the fellowship after a medical detox. The first time someone wanted to join who had not gone through the medical detox was a source of great conflict.

Early members were almost exclusively older, white, professional males. These were the “upper crust” of society the Oxford Group attracted. When the first women came to get sober, it was controversial. The first African American was a transvestite drug addict who wanted to get sober and single-handedly kicked in the door for many minorities to join the fellowship, although he himself did not stay sober.

Before going to the first meeting, you had to have a Sponsor and have done the work of what we would now call the first six steps.

So the early success rate is counting only people who;

- *Were male (later joined by a few women);*
- *Were white;*
- *Were from the upper classes;*
- *Had gone through a medical detox;*
- *Who knew “someone who knew someone” to locate and get into a meeting (and there were only two*

meetings anywhere at the time - Akron and New York.);

- *Were Protestant Christian, or willing to become one (most early Oxford Group members were Episcopal, Lutheran, or Methodist);*
- *Had already admitted their alcoholism;*
- *Had found their personal Higher Power or concept of God;*
- *Had already turned their life over to the care of that concept of God;*
- *Had detailed their previous misdeeds and actions in an inventory;*
- *Had shared that inventory with their Sponsor;*
- *Had come to see their own defects in what had gone wrong in their life.*

At that point, they were admitted to their first meeting, on their knees in prayer to have their defects removed, and subject to the approval of the existing members of the group.

Of the people who had jumped through all these hoops, 75% stayed sober or showed significant improvement from their first meeting. The real number of people who failed to reach the point of getting to a group may never be known.

Bill Wilson wrote with some concern how fear of losing what they found had prevented them from the kind of outreach AA now takes for granted. Today, meetings are available to anyone who looks, or has someone who cares enough to provide them with a meeting time and location. New people can find AA in the phone book; are directed by a doctor, a judge, or a clergyman; or simply through friends or family members who are already sober.

Bill kept a copy of his copy of the first printing of the book Alcoholics Anonymous

on his desk and recorded the fate of those whose stories had appeared in the first edition of the Big Book.

In addition to Dr. Bob's story, thirty-two additional personal accounts of recovery were published. Of these, twenty-one members went out. Seven died drunk, but the others made it back for a second chance at recovery.

Hank Parkhurst, the man who made it possible for the book to appear, was one of those who died drunk.

The lesson of the book has been that anyone, anywhere, who is willing to follow the directions, can find and keep sobriety.

"Following the directions" is more than just a pass through the twelve steps, but incorporating the lessons and principles found in the Steps into our daily life. We achieve that by repetition and constantly looking at how the tools we have been given can be used over and over again.

Bill and Bob reviewed the progress of their groups and reviewed their success rate. Different sources gave results from 5% to 35% actually remaining sober. Current medical tracking indicates from 31% to 37%

of AA attending maintain long-term sobriety, and the survey figures from AA's World Service give similar results.

But even those numbers defy the terminal nature of alcoholism over the previous history of mankind. The Twelve Step system, if followed, proved to provide the first substantial success for any system of finding and maintaining long-term sobriety.

It should also be remembered that with the exception of those few with significant religious or spiritual experiences, as indicated by Dr. Jung, there had been no system of getting anyone sober, and alcoholics had been doomed to a prolonged, agonizing death by the dissipation of the body and spirit alcoholism created, or the violent death alcoholics can bring upon themselves through their actions during drinking episodes.

It keeps us aware that anyone getting, and remaining sober, is a miracle by all spiritual and religious standards, and a "deviation" from previous expectations by scientific standards.

It should always keep us grateful.

AA Traditions

The Traditions module is, as are all subjects in this syllabary, a presentation of a single position on the meaning and application of the Traditions. As such subjective material requires, the reader may except or reject such portions as he or she feels is appropriate for their intended use.

There are few things that prove true of alcoholics, but it can be said that they do not like being told what to do.

The Traditions were not an attempt to tell AAs what to do, or even set the standard for AA groups. The Traditions were a result of errors made in groups and by individuals that resulted in the loss of early groups, and the loss of an unknown number of alcoholics who were driven away by those mistakes.

When the meetings were limited to the original two, Akron, OH and New York, the problems addressed by the two primary founders and their fellowships was frequently discussed between the groups before any alcoholics were made to create a formal standard.

The original meetings changed. They originally required a medical detox and working the equivalent of the first six steps before attending meetings. When that standard was dropped, the fellowship continued to grow.

The need for a personal connection to someone in the Oxford Group was never a

formal requirement, but it was the only entry for the first two groups. Clarence Snyder's group, which was unaffiliated with the Oxford Group, eliminated that requirement.

The membership limitation to upper class, white males was never formal, but the reality was that these people first gathered to use this process to get and remain sober.

The Traditions began as a series of articles published in *The Grapevine*, the AA 'meeting-in-print,' during the first decade or so of AA meetings, first within the Oxford Group and later as an independent entity. Bill Wilson, the author of those articles, drew heavily from the volume of correspondence maintained with groups around the world and individuals involved in the sudden growth of the AA Program.

After the *Saturday Evening Post* article in 1941, the membership exploded from a few hundred to several thousand, guided by the book, *Alcoholics Anonymous*. In that explosion, groups began to raise the number of qualifications for membership, which kept people away, alcoholics who otherwise could have stayed to hear the message, and could have worked the Steps to stay sober.

It should be argued that these new requirements were not to assure "the right kind of alcoholic" but a result of fear – personal fears and cultural fears of their time.

The lack of understanding of a healthy fellowship led to a number of impressive blunders in meeting-building. One meeting in the 1940s served beer at their meetings. The meeting quickly vanished and a new AA group did not form for several years. Even in recent news, an AA group was accused of the systematic sexual abuse that they touted as being part of the program.

Clearly, such acts are not part of the AA program, but the newcomer has no way of knowing this.

To this day, there are groups who do not subscribe to the Traditions and the Traditions are not required for form an AA meetings.

The purpose of this discussion is to explore the intent and application of the principles contained in the Traditions.

The Twelve Traditions are copyright by the central office for Alcoholics Anonymous. This article is based on the “Long Form” of each Tradition.

TAKEN FROM THE LONG FORM

“Our AA experience has taught us that: “

First Tradition

- 1.) *Each member of Alcoholics Anonymous is but a small part of a great whole. AA must continue to live or most of us will surely die. Hence our common welfare comes first. But individual welfare follows close afterward.*

Without the fellowship, it is complex variety and expanse; we are lost in our individual struggle and the drama of alcoholism. Together we are given the opportunity to find sobriety and to build a new life.

The fellowship continues to be a resource for us as we face new situations in the new life, and where we meet the newcomers to whom we “give it away.” It is the “giving it away”

that makes room for our next lesson and next revelation.

Regardless of personal opinion, regardless of our rise of self-righteousness, our sudden intolerance for those who are different from us (or who are *exactly* like us), it is observed a common religious concept of “willing submission” to the need of the fellowship to continue.

This almost never means sacrificing what we know to be true, but exercising the “restraint of tongue and pen” that tends to divide our fellowship into factions, hurt feelings, or drive wedges between those who would otherwise be part of our sobriety.

We may never learn to like everyone in the meeting. There will be people you meet in meetings that will test your ability to accept to its limit. But we are required to love them as expressions of our new trust in a Higher Power and our level of acceptance.

Traditions provide a common frame in which we see our Group, our Service Structure, and our shared need to keep our program available to ourselves and to those who come behind us.

Second Tradition

- 2.) *For our group purpose there is but one ultimate authority—a loving God as He may express Himself in our group conscience.*

Related to the First Tradition, the Second has us put our authority into the combined personal Higher Power expressed through the members of the Group and the Fellowship, and not in the loudest voice, the strongest passion, or the entrenched authority of a deluded Bleeding Deacon.

There is a desire to make that trust in our Higher Power about *other people's* refusing to submit to group conscience, or drive to get others to see the *right* way. But that direction

is for use to keep *our* hands off the results of the Group Conscience – it is about *our* restraint of tongue and pen.

Groups can become ill, as can individuals. The group that does not correct its behavior may cease to exist. The group that changes according to whim, fashion, or some passing concept of political correctness may also risk ceasing to exist.

Group Inventory is suggested by World Service to keep each Group active as a reflection of its membership and the need that group serves.

Third Tradition

3.) Our membership ought to include all who suffer from alcoholism. Hence we may refuse none who wish to recover. Nor ought AA membership ever depend upon money or conformity. Any two or three alcoholics gathered together for sobriety may call themselves an AA Group, provided that, as a group, they have no other affiliation.

The Third Tradition was the most protective of all AA's service legacies. The single requirement of having the desire to stop drinking does not exclude desire for recovery from other problems, but identifies the qualification of that individual for the very reason the AA group is gathered.

This means you may be an alcoholic, AND an addict, AND a compulsive gambler, AND an over-eater, AND a sexual compulsive, AND any number of other problems. Many of these problems are addressed with other 12-Step programs where the membership share those specific problems, but a “singleness of purpose” in inclusive.

But the requirement to be in an AA meeting is the desire to stop drinking. Beyond that, it is about their willingness to perform the work outlined in the Twelve Steps to find and maintain sobriety.

The Big Book is often misunderstood as saying that ONLY an alcoholic can be in the meetings. *A member is not even required to identify as anything*, other than by local custom. The only question of identity is whether or not you identify with the reason for this AA meetings existence; to carry the message to the suffering alcoholic who still suffers, and that you satisfy only requirement for membership - to have the desire to stop drinking.

Any additional qualification is an outside issue for the group, but may be vital to your own Recovery process.

—❖— Application for Membership —❖—

ALCOHOLICS ANONYMOUS

*Having read the twelve steps and having taken Step No. 1,
I apply for membership in the Montreal Group of Alcoholics
Anonymous.*

*When admitted to membership it will be my desire to co-
operate with the group as fully as possible and not to harm
it, interfere with its work or impede its progress in any way.*

Therefore:

1. I agree not to attend any meeting on a day on which I have taken anything whatsoever to drink of an alcoholic nature.
2. In the interests of complete honesty, if I do any drinking whatsoever at any time, I will make the fact known to my sponsor, or in his absence, to some other senior member of the group, and will not attempt to deliberately hide such drinking from the group.
3. Further, in the event that I continue drinking intermittently while ostensibly a member of this group, I agree to relinquish my membership if asked to do so by the group through my sponsor or the group secretary.
4. Understanding that although the aims and objects of A.A. are well known, names and affairs of the group are definitely secret, I agree not to divulge names of members to outsiders or to discuss private affairs of the group with non-members.
5. I undertake to introduce new members to the group only after they have fulfilled whatever qualifications for membership the group may from time to time require.
6. I undertake to familiarize myself with the duties and obligations of a sponsor and when called upon to sponsor an applicant will make every effort to see that he becomes a good member.

Date _____

Applicant

Sponsor

Application for Membership

In an effort to enforce their own vision of AA, some early groups wrote official letters of expulsion from the fellowship, as shown in this example:

December 5, 1941

From the Executive Committee of the Los
Angeles Group of Alcoholics Anonymous

Dear Mrs. Irma Lavone,

At a meeting of the Executive Committee of the Los Angeles Group of Alcoholics Anonymous held December 4, 1941, it was decided that your attendance at group meetings was no longer desired until certain explanations and plans for the future were made to the satisfaction of this Committee. This action has been taken for reasons which should be most apparent to yourself.

It was decided that, should you so desire, you may appear before members of this Committee and state your attitude. This opportunity may be afforded you between now and December 15, 1941.

You may communicate with us at the above address by that date. In case you do not wish to appear, we shall consider the matter closed and that your membership is terminated.

Source: Wally P.

Fourth Tradition

4.) *With respect to its own affairs, each AA group should be responsible to no other authority than its own conscience. But when its plans concern the welfare of neighboring groups also, those groups ought to be consulted. And no group, regional committee, or individual should ever take any action that might greatly affect AA as a whole without conferring with the Trustees of the*

General Service Board. On such issues our common welfare is paramount.

Independence of the individual groups has been hailed as a march of immature anarchy, but the truth has been new meeting formats have evolved to suit the needs of particular fellowships. A group that creates conditions or a format that others find unacceptable will either

a) prove their value as they find support,

b) fade away as the new meeting succeeds or fails, according to its value to its local community.

Throughout the country, people open meetings with different readings, or with no readings. They announce their name and that they are alcoholic, or make no identification at all. They have book readings, speaker meetings, writing meetings, discussion-only meetings (men only, women only, gay only, lawyer only, teacher only), and special meetings put on as classes or workshops for the local fellowship.

Every group has someone move into their area from another region where things are done differently, who tries to make people “do it right!”

Every meeting is free to form and format as it sees fit, provided it does not affect another group or the overall structure of AA. This means it is a courtesy for a meeting starting on a night where another meeting already exists let that group know of its intent so the first meeting is acknowledged. But neither group can claim any authority to approve or disapprove the other meeting.

Meetings are free to change the readings from AA, but cannot claim that their revised materials represent AA as a whole – it is simply not true. But such changes may serve their Group’s needs in recovery.

In many respects, relationships between Groups are entirely optional and usually considered an “Outside Issue” as explained in the Tenth Tradition. That Group A passes the 7th Tradition at the beginning of the meeting, and Group B passes the 7th Tradition basket at the end of the meeting, is not the concern of the other meeting.

Fifth Tradition

5.) Each Alcoholics Anonymous group ought to be a spiritual entity having but one primary purpose—that of carrying its message to the alcoholic who still suffers.

Groups become entrenched in their own glory, particularly when members have remained sober for many years. There is a real danger that members of a group may set themselves up as the judges of all things good for local and international AA.

It is never the purpose of an AA group to prove their superiority or ranking over other groups. The Fifth Tradition keeps the focus on the ability of the group, by whatever composition or format, to serve the alcoholic who still suffers.

“The alcoholic who still suffers” do not mean newcomers, although newcomers are usually in the most identifiable distress. Members with long term sobriety face new problems in life and may need the combined experience, strength, and hope of their group to face the new problem. Someone with a few months may blossom with new fears that had been kept asleep by drunkenness and now need their group to get them into the next Step or the next exercise of Principles.

The newcomer is always the first thought with this Tradition. Does the Group carry the message of recovery to that newcomer? Is the meeting set up and open at the time promised? Is there a personal ‘hello’ for the new man or woman walking or rolling through the door for the first time?

Are they confident that the newcomer will find that meeting there the next time?

Some Groups further carry the message to treatment centers, hospitals, or the homes or hospital rooms of alcoholics who cannot attend. Such outreach is up to the Group Conscious, as expressed in Tradition Four.

Sixth Tradition

6.) *Problems of money, property, and authority may easily divert us from our primary spiritual aim. We think, therefore, that any considerable property of genuine use to AA should be separately incorporated and managed, thus dividing the material from the spiritual. An AA group, as such, should never go into business. Secondary aids to AA, such as clubs or hospitals which require much property or administration, ought to be incorporated and so set apart that, if necessary, they can be freely discarded by the groups. Hence such facilities ought not to use the AA name. Their management should be the sole responsibility of those people who financially support them. For clubs, AA managers are usually preferred. But hospitals, as well as other places of recuperation, ought to be well outside AA-and medically supervised. While an AA group may cooperate with anyone, such cooperation ought never go so far as affiliation or endorsement, actual or implied. An AA group can bind itself to no one.*

Alcoholics are notorious for being power-grabbing egotists. The purpose of the Sixth Tradition is to avoid the perils of position, notoriety, or other benefits from association with an outside group.

Linked directly to the non-affiliation of Tradition Eight, the Sixth Tradition prevents the threats of money, property, or prestige that have caused other public benefit concerns to vanish over the years.

We are not an organization in the traditional sense. We have a policy of cooperation with outside organizations that must never take the form of an “endorsement” by name, material, funds, or public statements to or from such outside groups. The name AA should not be linked in any public or business sense with any outside organization, no

matter how attractive or beneficial it may seem at the moment.

AA has learned to function on a principle known to Native Americans for many years – “It must be good for seven generations.” This means what seems beneficial or attractive at the moment may become a liability that will cause unity of the fellowship to suffer, and may cause groups or areas to lose their ability to serve the alcoholics who still suffer.

Seventh Tradition

7.) *The AA groups themselves ought to be fully supported by the voluntary contributions of their own members. We think that each group should soon achieve this ideal; that any public solicitation of funds using the name of Alcoholics Anonymous is highly dangerous, whether by groups, clubs, hospitals, or other outside agencies; that acceptance of large gifts from any source, or of contributions carrying any obligation whatever, is unwise. Then too, we view with much concern those AA treasuries which continue, beyond prudent reserves, to accumulate funds for no stated AA purpose. Experience has often warned us that nothing can so surely destroy our spiritual heritage as futile disputes over property, money, and authority.*

Accepting money from outside organizations opens the door to have to conform to the donor’s requirements to get the next donation. While many sources may claim non-involvement and a lack of requirements for the money, it creates an open door for a donor who has made such a contribution to dictate that only certain people, a certain class of person, a certain race, a certain religious group, political affiliation, or class, be reached with the contributor’s money.

Independence from outside support, to be self-supporting, is required for the adult responsibility of any individual attempting to achieve a mature, healthy sobriety. The

collection of alcoholics in their search for this same kind of healthy responsibility can only benefit from the same responsibility for their group's financial health.

Eighth Tradition

8.) Alcoholics Anonymous should remain forever non-professional. We define professionalism as the occupation of counseling alcoholics for fees or hire. But we may employ alcoholics where they are going to perform those services for which we may otherwise have to engage non-alcoholics. Such special services may be well recompensed. But our usual AA "12th Step" work is never to be paid for.

When AA grew from a few hundred people to several thousand in the weeks after the appearance of the Saturday Evening Post article by Jack Alexander, it became clear that someone had to answer the mail, answer the phones, and perform the unglamorous work of responding.

As with other changes in AA, it was a huge controversy as to whether someone being paid for secretarial work was performing a Twelfth Step job, which should never be subject to a paycheck.

Bill Wilson explains the principle of responsible services in his chapter on the Eighth Tradition in *Twelve Steps and Twelve Traditions*, but confirmed that no one should ever be paid for 12th Step Work. But it was also a violation of the Seventh Tradition to expect someone to do non-12th Step work for free.

"Our own contributions" slowly began to mean paying for the phone bill for an AA phone, the box rent for an AA mailing address, or (when local meetings need a physical location for local services) rent for a reasonable local office.

Speakers for AA are not to be paid for their talk, but it is reasonable to provide for transportation costs and, when needed, a local sleeping spot. If the speaker travelled to that city, the gas, rail, or airfare would still apply. If the local community cannot host the speaker in a member's home, it may be appropriate for the local group to provide a motel room.

Despite the spiritual nature of the Program, it is not appropriate to suddenly expect loggers to cut down trees to make paper for AA literature as a free service to the Fellowship, nor can we expect buildings to be built with contributed electricity for local meetings.

The Eight Tradition protects from the same big-shotism that is the focus of Tradition Six, while acknowledging the real financial costs of providing our services.

Ninth Tradition

9.) Each AA group needs the least possible organization. Rotating leadership is the best. The small group may elect its Secretary, the large group its Rotating Committee, and the groups of a large Metropolitan area their Central or Intergroup Committee, which often employs a full-time Secretary. The trustees of the General Service Board are, in effect, our AA General Service Committee. They are the custodians of our AA Tradition and the receivers of voluntary AA contributions by which we maintain our AA General Service Office at New York. They are authorized by the groups to handle our over-all public relations and they guarantee the integrity of our principle newspaper, "The AA Grapevine." All such representatives are to be guided in the spirit of service, for true leaders in AA are but trusted and experienced servants of the whole. They derive no real authority from their titles; they do not govern. Universal respect is the key to their usefulness.

Many AA groups have a regular Home Group meeting where group issues are decided, but some have chosen to create a committee to conduct the group's business. The decision to handle operational issues this way is up to the Group.

But such a committee is not vested with permanent authority. The Group needs to be able to create, or dissolve, such service bodies, as needed.

A few groups in an area may want to host a Round-Up, a Conference, or an Assembly, and create a committee to carry out their issues and do the work. They may even vote to continue the committee from year to year, as needed. Such committees need to reflect the groups they service in an open, accessible, and democratic manner.

Groups in an area may choose to create an Intergroup with representatives from member groups to carry out services for the local fellowships. As I write, a local intergroup provides a depository where groups can go to buy books, literature, current meeting guides (which the intergroup edits and publishes), and outside items like bumper stickers, anniversary chips, posters, and other items the Intergroup has approved for sale. Like individual meetings, service boards are not the authority of groups outside their service area and need not be approved by anyone other than the groups they serve.

It should also be said that opinions on the right and wrong way to carry out services abound, and anyone on the losing side of a vote is free to express their opinion and displeasure.

But the Second Tradition remains our authority, *as expressed in the group conscience*. Dissenting opinions are invited and may win a later vote.

Tenth Tradition

10.) No AA group or member should ever, in such a way as to implicate AA, express any opinion on outside controversial issues-particularly those of politics, alcohol reform, or sectarian religion. The Alcoholics Anonymous groups oppose no one. Concerning such matters they can express no views whatever.

An earlier fellowship, the Washingtonian Temperance Society failed to find the common focus we have for groups and, as a result, competed with each other for members, took public positions on public issues, took both sides of public arguments in very public disagreements, and managed to be lost to history because of massive disunity.

Alcoholics Anonymous does not have opinions on public issues. Members of Alcoholics Anonymous have *lots* of opinions and will frequently express them at the top of their lungs, sometimes even in meetings.

As a Fellowship, in the name of Unity (First Tradition), Service (Twelfth Step, Fifth Tradition), and Recovery (the sum goal of all of the Steps and Traditions), we remove outside issues from our interior discussions.

Alcoholics Anonymous has no position on political issues. *Members* have lots of opinions on public issues.

Alcoholics Anonymous has no position on religious issues. *Members* have lots of opinions on religious issues.

Alcoholics Anonymous has no position on social issues or private therapies. *Members* have lots of opinions on social issues and private therapies.

We want the newcomer to find a meeting that is united on Recovery, not divided by politics, religion, controversy, or a self-righteousness that prevents the members from carrying the message.

AA must protect its primary purpose (Fifth Tradition) by keeping the meetings open and inviting to the newcomer. None of us want to be responsible for the newcomer leaving his or her first meeting feeling unwelcome because there was an argument over an outside issue, particularly if it makes them believe they are on the wrong side of the issue for AA. Outside issues can include politics, religion, substances other than alcohol, behaviors, or psychological theories.

Having no opinion prevents AA from being on the right side or the wrong side of outside issues. Members always have the freedom to discuss such issues among themselves and outside the framework of the Meeting.

Eleventh Tradition

11.) Our relations with the general public should be characterized by personal anonymity. We think AA ought to avoid sensational advertising. Our names and pictures as AA members ought not be broadcast, filmed, or publicly printed. Our public relations should be guided by the principle of attraction rather than promotion. There is never need to praise ourselves. We feel it better to let our friends recommend us.

Anonymity of the membership does not mean no one ever knows about AA. The neighbors knew you were drunk; they probably noticed you aren't drunk now. They may suspect why. Your family probably knows what you are doing. You may have an abundance of gratitude for the Program and AA.

But this does not give permission to make public pronouncements on behalf of AA, hoping to get others into AA, or to build up the membership of any group.

Avoiding promotion and campaigning for membership means the responsibility for the attraction of AA remains with the result of the group's actions (the Steps and Recovery) and not clever campaigns or slogans. This

does not mean you will not see public service announcements on television, or hear them on the radio. Those services let people know that AA exists and is available if they want to seek out help.

Non-promotion does not eliminate a policy of "cooperation with the professional community." This means that the local service boards can provide information to requests from groups of educational, religious, medical, legal, or public service groups. It also means a phone number is available in most AA communities for more information about local AA meetings.

Twelfth Tradition

12.) And finally, we of Alcoholics

Anonymous believe that the principle of Anonymity has an immense spiritual significance. It reminds us that we are to place principles before personalities; that we are actually to practice a genuine humility. This to the end that our great blessings may never spoil us; that we shall forever live in thankful contemplation of Him who presides over us all.

Anonymity was originally intended to protect members from the public stigma of alcoholism, but proved to be a powerful tool that allowed newcomers to enter the program, even if they do not give their right name when they enter the doors. Anonymity was seen as a way to take away the markers of social position, legal standing, or background. They became "an alcoholic in Recovery," rather than Name / Occupation / Address / Bank Balance / Connections who is an alcoholic.

In the early years, local and national celebrities achieved sobriety and revealed their membership in AA, only to get drunk again to give the message "AA didn't work for XX, so it probably won't work for you..." The most notable case was Rolle H., a national

baseball star who achieved highly publicized sobriety, and drank again.

Anonymity became a defense for the alcoholic to clear away distractions to achieve sobriety

and to protect the fellowship from the actions of a single person to taint the public perception of that person representing AA.

Other than Alcohol

The Drug Addiction and AA module is, as are all subjects in this syllabary, a presentation of a single position on the meaning and application of the Traditions. As such subjective material requires, the reader may accept or reject such portions as he or she feels is appropriate for their intended use.

Problems other than alcohol include a host of substances and behaviors. Please check the directory of 12-Step group contacts at the end of this article.

The “Primary Purpose” of AA, according to the wording of Tradition Five, is to:

“– to carry its message to the alcoholic who still suffers.”

In some areas, this has become an issue as to who should be allowed in, or allowed to speak, in closed meetings.

A Very Short History of Drugs in the United States

For most of US History, alcohol has been legal. In some communities, and briefly on the national level, it was made illegal, but that never resulted in a lack of alcohol.

From the beginnings of the drug trade in the 19th Century, drugs were not regulated, forbidden, or illegal. They were looked down upon, like alcohol, and identified their own class of addicts as alcohol attracted its alcoholics.

It was the use and abuse of alcohol and drugs that identified the problem they created.

While legal, alcohol and drugs both were highly profitable industries that defended themselves from legislation. When activist groups drove criminal hands, they become more profitable and the problems of the substance controlled by the underworld worsened the situation.

The first pain killer was alcohol and it remained the only option for many lifetimes. When morphine entered the country, it was a hit for medical therapies and was highly addictive. Soldiers of the North and South became so hooked on morphine during the Civil War, it was identified as “The Soldier’s Disease.”

In the magazines of the day, the ads could be found to offer the cure for Alcoholism, the cure for Morphine addiction, an ad for the miracle cure for morphine addiction (called “heroin”), sources for brewery equipment, needles, and mail order drug sales, often on the same page.

Cocaine was introduced in the South and on plantations in Latin American, to get slaves to work faster – and was accompanied with a series of drug laws that can only be described as racist.

Public outcry demanded that all drugs be banned, but the lobbies for two of the drugs were too strong to permit such legislation.

Those two drugs are still in use today: nicotine and caffeine.

By the 1930s, everything except nicotine and caffeine became underworld commodities, and moonshiners continued after prohibition when the taxes were felt to be unfair.

After World War II, a whole new galaxy of drugs began to appear, only to be banned one at a time in later legislation, either locally or federally. Tranquilizers, diet pills, recreational formulations, hallucinogens, and “designer drugs.” began and continue to rise.

12-Step programs make it clear that it is not the substance that creates the alcoholic or the addict.

“Therefore, the main problem of the alcoholic centers in his mind, rather than in his body...”

Page 22

Necessary Medications

In the beginning of Chapter Five, the Big Book refers to those with “There are those, too, who suffer from grave emotional and mental disorders, but many of them do recover if they have the capacity to be honest.”

In the progress of psychiatry, pharmacology, and various therapies, those with the grave emotional and mental disorders of Bill’s day can be elevated to the same starting point as any other alcoholic through judicious use of appropriate medications. For decades, individual members of AA have demonized anyone in such circumstances with the taunt, “if you’re taking pills, you aren’t really sober.”

Over the years, unknown numbers of alcoholics have listened to the reprimand, thrown away their pills, and were lost in

drunkenness or various forms of social and literal suicide.

Members in Recovery would never dream of performing dentistry if someone in a meeting came in with a toothache. They wouldn’t perform surgery on a whim, but they put themselves in the position of medical professionals with their pronouncements on other member’s medical and psychiatric condition. They do not tell the diabetic to throw away their insulin, or the asthmatic to forego the inhaler, but they tell those who come to us for sobriety to stop using medications that their doctors gave them.

Those members, who are not doctors, nurses, or other medical professionals, have *opinions*. Their pronouncements are from anecdote (“I heard about someone who...”), or ignorance, or simple jealousy (“I don’t get to use pills, so neither can you...”).

A member in the local fellowship picked up a 20-year-chip after almost 20-years trying to get one year of sobriety, told the gathering at his Home Group; “I listened to people who told me that if I didn’t stop using my meds, I wasn’t sober, and I wanted to be sober more than anything. So I threw away my meds and wound up psychotic, drunk, and in jail or a hospital – or both. Without my meds, I cannot get to the starting point of being honest.

Everyone in AA has opinions, but it is unfair to risk another’s sobriety or life based on mere opinion.

A Very Short History of Mental Illness

Like alcoholism and drug addiction, there is nothing new about Mental Illness except for the name.

For centuries, people with the wide array of problems that now come under the umbrella

of “mental illness” were known under other names.

They were “mad,” “inverted,” “selfish,” or (most unfortunately) “demon possessed.”

Treatment consisted of exile, expulsion, imprisonment, “treatment” by what we would now call torture, or a legally sanctioned death.

Untreated and without hope, these people were shunned or isolated, at best.

Treatment models began to appear in the 19th Century and continue to evolve. Like the “belladonna” treatment for alcoholics, sufferers were subjected to an array of revolutionary treatments with limited success, if any at all. Water treatments, electric shock, “magnetic” treatment, lights, salves, aromas, symbols, diets, restraints, magnets, and concoctions passed into and out of favor.

The evolution of psychiatry as “the talking cure” seemed successful for the depressed, neurotic, or those driven into “crazy” behaviors as a response to events in their lives, but not until the latter part of the 20th Century did a pharmacological component enter the treatment.

Certain conditions, it appeared, were the result of actual chemical imbalances in the body of the afflicted. Lithium salts produces results in manic-depressives (now called bipolar), but other drugs were developed that produced varying effects of success in the patients identified as Mentally or Emotionally Ill.

While a good argument can be made that the professional community began prescribing to quiet the patient’s symptoms (and complaints) without effecting real change, others report that the judicious use of psychologically prescribed drugs could

elevate the psychotic to the point where they could enjoy the same substance or behavior free life as any other candidate for membership in AA.

If they had the desire to stop drinking (which assumes they had experienced a problem with alcohol) they could get sober and work the Steps as equals.

“The capacity to be honest,” which had been impossible to produce before, was appearing in men and women who would have previously been considered unreachable.

Again -

“Therefore, the main problem of the alcoholic centers in his mind, rather than in his body...”

Page 22

Guidelines for Prescriptions

Over the years, a few guidelines have evolved that may or may not be acceptable to people within Alcoholics Anonymous dealing with the prescriptions required by those in medical treatment for mental or emotional problems.

1. The patient does not choose the substance.
2. The patient does not choose the amount.
3. The prescription must be written by a doctor who has seen you and knows your case.
4. The patient describes to the patient his/her condition, sobriety needs, and expresses their concerns for prescriptions.
5. The patient always asks if he/she can take less than the prescribed amount. (Never more.)

6. Having expressed those concerns with the doctor, the patient takes the prescription as prescribed.
7. One Milligram (1 mg) over is using and the sobriety date must change.

Patients may want a second opinion on their treatment, which should be discussed with his/her Sponsor, before changing physicians. The Sponsor can be of no use if the person attempting to find lasting sobriety is not open and honest with that Sponsor.

Identification in Meetings

The Third Tradition makes the only qualification that the person attending has *“the desire to stop drinking.”*

That does not mean that one is a pure alcoholic, which almost seems to be a contradiction in terms.

In his story, Bill W. writes of the use of heavy sedatives, Dr. Bob was given a “goofball” on the morning of his first day of sobriety, and several authors whose stories have appeared in the back of the four editions have shared that drugs have also played a part in their stories, and their personal recoveries.

Dozens of other 12-Steps programs began to appear as we recognized the other substances and behaviors that could benefit from this program of vigorous action and spiritual awakening. Al-Anon became an official new program, closely followed by Narcotics Anonymous.

Other 12-Step programs, which may be needed in addition to AA, are listed at the end of this article.

The intent is that everyone, particularly in a “closed” meeting, share the alcoholic reality – that no newcomer leaves their first meeting hearing about the well-established or most recent trends in drug abuse and psychiatric

problems, and then tells themselves “I do not belong in Alcoholics Anonymous. I didn’t use drugs like that. I didn’t do those things.”

In the beginning, we are easily thrown off focus by outside issues, including drugs. The alcoholic, who is also a drug addict or addicted to some other substance or behavior, needs to respect the AA Newcomer with clarity. Their story may include drugs, but in meetings we are supposed to share our struggle in Recovery rather than reinforce our wretched past.

The Third Tradition does not require that a member identify themselves in any way; that identification is a local custom. In most areas, they identify themselves by name and some way of saying that they are alcoholic. In other areas, they simply say their name and omit any identification.

Since the end of World War II, when the Second Edition of our Big Book was prepared, the world had changed. Illegal drugs and the abuse of prescription drugs had flourished as never before in history. Designer drugs appeared to open new markets or escape existing laws. However, the intent remains the same, the compulsion remains the same, and (we hope) the dedication to the Twelve Steps and Recovery remains the same.

Bill Wilson wrote several times that the real goal of AA was emotional sobriety, the ability to deal with life on life’s terms without mind altering drugs. It was his intent, as he reportedly said several times, to allow the alcoholic to attain a level of maturity and responsibility to permit them to function in the world exactly as a non-alcoholic, healthy person. People would not need to consider their alcoholic past in their dealings. The recovering alcoholic was to be held to the same standard as a non-alcoholic – through the Steps they would be elevated to common

expectation of any healthy, functioning member of society.

The member who claims “sobriety,” but still indulges in drugs, crime, abusive behavior or claims other people behavior is to be judged, but no one is to judge their own behavior, are unclear on what we mean of “sobriety.” As always, a dictionary definition is a good place to begin:

so·bri·e·ty [suh-brah-y-i-tee, soh-] –
noun

1. *the state or quality of being sober.*
2. *temperance or moderation, especially, (but not only) in the use of alcoholic beverages.*
3. *seriousness, gravity, or solemnity: an event marked by sobriety.*

If the problem “centers primarily in the alcoholics mind” and we have identified “the” result of these Steps to be a Spiritual Awakening, then the repair of the problem and following the result becomes our functioning definition of “sober.”

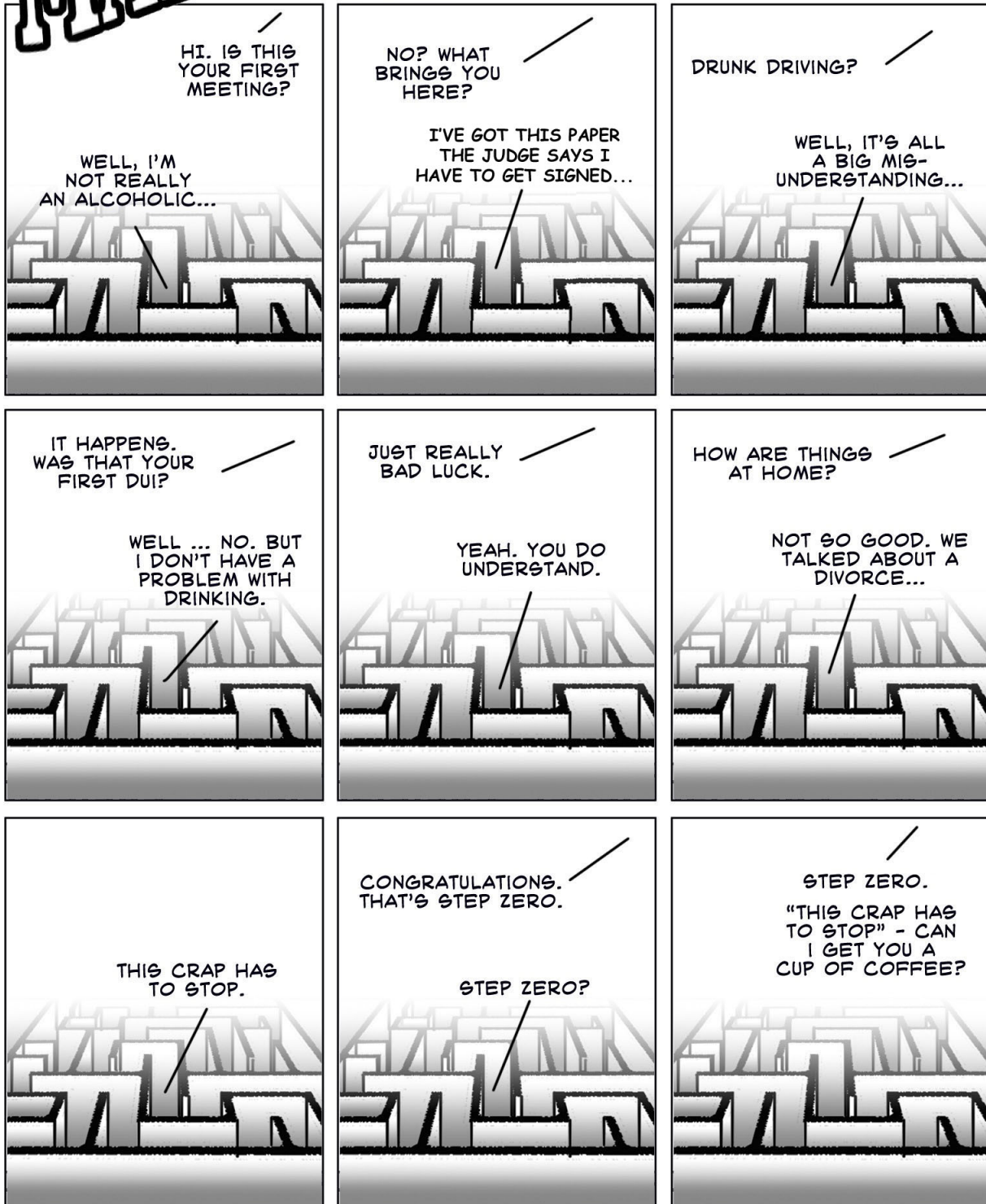
In each program, we celebrate the time free from the substance or behavior that got us into the door.

When attending a closed AA meeting, we respect *those* doors when asked to identify ourselves. We may be one or more of what qualifies us for those other programs, but within AA, we are a recovering “alcoholic.”

MAZING RECOVERY

STEP ZERO

BY JOE A.



Closing Comments

There is a spoken guide for the process that should be observed in a class structure:

- *Tell them what you're going to tell them.*
- *Tell them.*
- *Tell them what you've told them.*

In any session of the class, try to summarize the basic points made during the class.

It is recommended that you cite your sources. The original closing comments for the class, which is the basis of this proposal, includes a statement along the lines:

"...The information I shared with you tonight does not come from me. It is the result of over twenty years of men and women in AA sharing their stories, their research, and their discoveries. All I have done is pass it along to you. If you

don't find it useful just now, tuck it away for later. It may mean a lot to you. It may save your life."

If it feels appropriate to do so, give them something along the lines of:

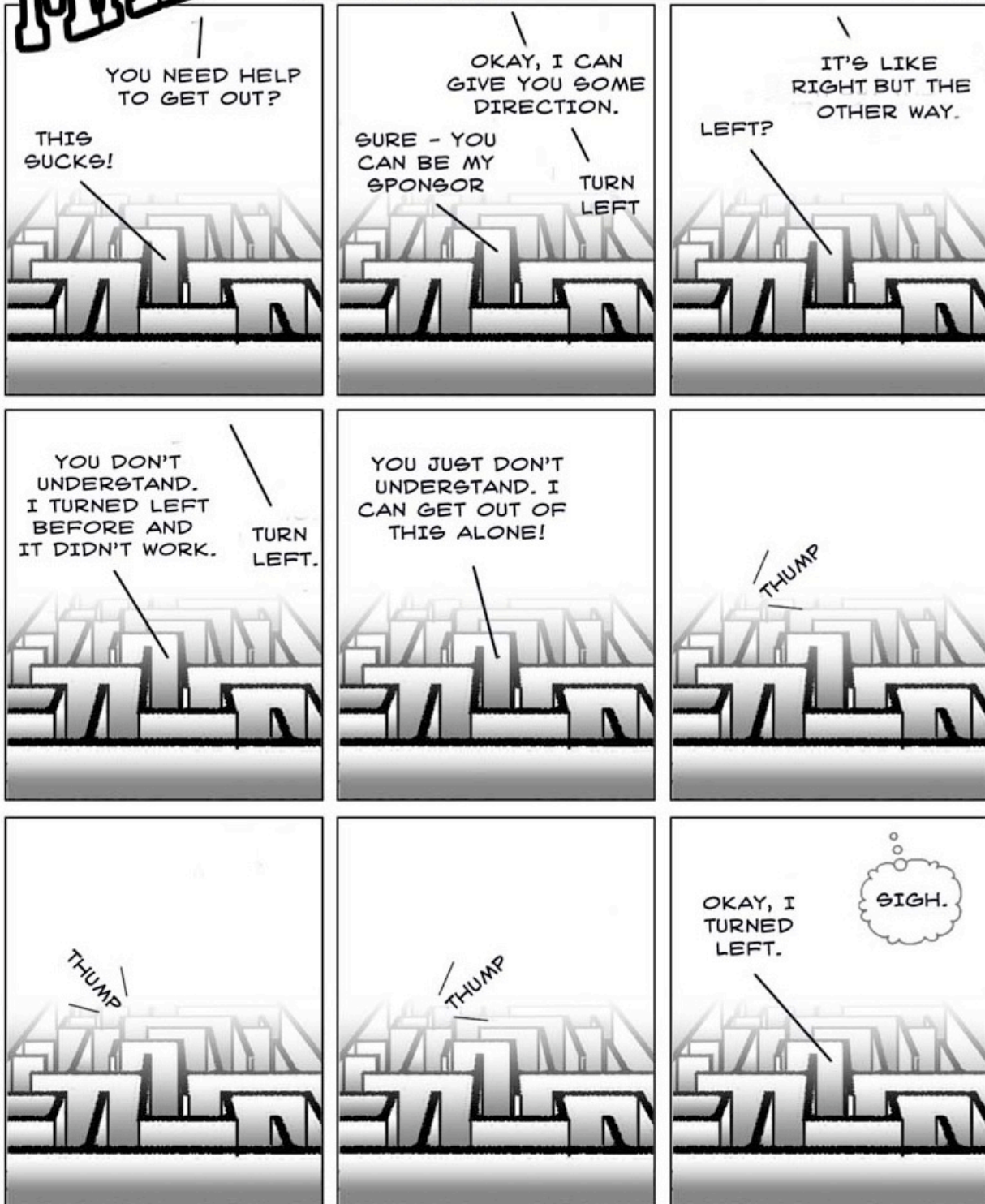
"If you leave here tonight with one or two things you can use, hang onto it. It is almost impossible to retain everything I've thrown at you. It isn't something you can expect to do, but try to hold onto the one or two things that mean something to you. Come back for more next time or at your next AA meeting."

After each class, sit down to find what you got out of your own class and apply that in the next meeting of the class.

MAZING RECOVERY

A NEWCOMER

BY JOE A.





A RECOVERY READER

A GUIDE FOR SPONSORS, STUDENTS & TEACHERS

**A COLLECTION OF WRITINGS ON 12-STEP RECOVERY
FROM THE 1940S TO THE 21ST CENTURY, INCLUDING:**

- THE FIRST BOOKLET ON AA SPONSORSHIP BY CLARENCE SNYDER (1944)
- ONE WAY GROUP INVENTORY GUIDE (1959)
- ESSAYS ON SPIRITUALITY, INVENTORY, AND LIVING IN RECOVERY
- ARTICLES AND INDEXES FROM:

BAREFOOTBILLSWORLD.NET/AAHISTORY

SOBER.ORG

SPONSORMAGAZINE.ORG

ANONYMOUSREVIEW.ORG

AND MANY INDIVIDUAL AUTHORS



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